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| B1 (Official   | Form 1)(04                                      | /13)                         |  |  |   | 04111011  |                                      | go <u> </u>  | · <b>-</b>  |  |   |                                     |
|--|---|------------------------------|--|--|---|---|--------------------------------------|--|---|--|---|-------------------------------------|
| United States Bankruptcy Cor<br>Northern District of Illinois  |   |                              |  |  |   |   |                                      | ourt   |   |  | Voluntary Petition  |                                     |
|  | ebtor (if ind<br>Mary Lyn                       |                              | er Last, First                                 | , Middle):   |   |   | Name                                 | of Joint De  | ebtor (Spouse)  | ) (Last, First                               | , Middle):  |                                     |
| All Other Names used by the Debtor in the last 8 years (include married, maiden, and trade names):   |   |                              |  |  |   |   | used by the J<br>maiden, and         |  |   | 8 years                                      |   |                                     |
| Last four digition on the control of |   | Sec. or Indi                 | vidual-Taxpa                                   | ayer I.D. (  | (ITIN)/Com  | plete EIN   | Last f                               | our digits o   | f Soc. Sec. or  | Individual-                                  | Гахрауег I.   | D. (ITIN) No./Complete EI           |
| Street Addre   | ess of Debto<br>ason Stre                       |                              | Street, City,                                  | and State)   | ):  | am c .  |                                      | Address of   | Joint Debtor  | (No. and St                                  | reet, City, a   | ,                                   |
|  |   |                              |  |  | Г   | ZIP Code<br><b>60115</b>  |                                      |  |   |  |   | ZIP Code                            |
| County of R  DeKalb  | Residence or                                    | of the Prin                  | cipal Place o                                  | f Busines:   |   |   | Count                                | y of Reside  | ence or of the  | Principal Pla                                | ace of Busi   | ness:                               |
| Mailing Ado  | dress of Deb                                    | otor (if diffe               | erent from str                                 | eet addres   | ss):  |   | Mailii                               | ng Address   | of Joint Debte  | or (if differe                               | nt from str   | eet address):                       |
|  |   |                              |  |  | Г   | ZIP Code  | <u>:</u>                             |  |   |  |   | ZIP Code                            |
| Location of (if different  | Principal As<br>from street                     | ssets of Bus<br>address abo  | siness Debtor<br>ove):                         | •  |   |   |                                      |  |   |  |   |                                     |
| (Fa  |   | Debtor                       | 1 )  |  |   | of Business   | S                                    |  | •   | -  |   | Under Which                         |
| (Form of Organization) (Check one box)  Individual (includes Joint Debtors)  See Exhibit D on page 2 of this form.  □ Corporation (includes LLC and LLP)  □ Partnership  □ Other (If debtor is not one of the above entities, check this box and state type of entity below.)  |   |                              | ors)  n.  LLP)  bove entities,                 | (Check one box)  ☐ Health Care Business ☐ Single Asset Real Estate as der in 11 U.S.C. § 101 (51B) ☐ Railroad ☐ Stockbroker ☐ Commodity Broker ☐ Clearing Bank |   |   | s defined                            | the Petition is Filed (Check one box)  Chapter 7 Chapter 9 Chapter 11 Chapter 11 Chapter 12 Chapter 12 Chapter 13 Chapter 13 Chapter 13 Chapter 13 Chapter 15 Petition for Recognition of a Foreign Main Proceeding Chapter 13 |   |  | Petition for Recognition Main Proceeding Petition for Recognition |                                     |
|  | Chapter 1                                       | 5 Debtors                    |  | Other  |   |   |                                      |  |   |  | e of Debts  |                                     |
| Each country   | lebtor's center  in which a for g, or against d | oreign procee                | eding  | Tax-Exempt Entity (Check box, if applicable)  ☐ Debtor is a tax-exempt organizatio under Title 26 of the United States Code (the Internal Revenue Code).       |   |   | le)<br>zation<br>tates               | defined<br>"incurr   | are primarily co<br>d in 11 U.S.C. §<br>red by an indivi-<br>onal, family, or b | nsumer debts,<br>101(8) as<br>dual primarily | for   | Debts are primarily business debts. |
|  | Fil   | ling Fee (C                  | heck one box                                   | κ)   |   | Check   | one box:                             | 1  | Chap  | ter 11 Debt                                  | ors   |                                     |
| ☐ Filing Fee to be paid in installments (applicable to individuals only). Must attach signed application for the court's consideration certifying that the debtor is unable to pay fee except in installments. Rule 1006(b). See Official Form 3A.  ☐ Filing Fee waiver requested (applicable to chapter 7 individuals only). Must care the being deposited for the court's consideration. See Official Form 3B.   |   |                              |  |  | Debtor is not<br>if:<br>Debtor's agg<br>are less than<br>all applicabl<br>A plan is bei | a small busing regate nonco \$2,490,925 (each boxes: any filed with | amount subject this petition.        | lefined in 11 United debts (exo  | J.S.C. § 101<br>cluding debts<br>on 4/01/16                                     |  |   |                                     |
| Statistical//  | Administrat                                     | ive Inform                   | ation  |  |   | :   | in accordance                        | e with 11 U.S  | S.C. § 1126(b).   | THIS   | SPACE IS  | FOR COURT USE ONLY                  |
| ☐ Debtor e   | estimates that<br>estimates that                | t funds will<br>t, after any | l be available<br>exempt prop<br>for distribut | erty is ex   | cluded and  | administrat   |                                      | es paid,   |   |  | , 511165 15   |                                     |
| Estimated N  1- 49   | Number of C:<br>50-<br>99                       | reditors  100- 199           | 200-   | 1,000-<br>5,000  | 5,001-<br>10,000  | 10,001-<br>25,000   | 25,001-<br>50,000                    | 50,001-<br>100,000   | OVER 100,000  |  |   |                                     |
| Estimated A  |   | \$100,001 to<br>\$500,000    | \$500,001<br>to \$1                            | \$1,000,001<br>to \$10<br>million  | \$10,000,001<br>to \$50<br>million  | \$50,000,001<br>to \$100<br>million                                 | \$100,000,001<br>to \$500<br>million | \$500,000,001 to \$1 billion   | More than   |  |   |                                     |
| Estimated L  \$0 to \$50,000   | \$50,001 to \$100,000                           | \$100,001 to<br>\$500,000    |  | \$1,000,001<br>to \$10<br>million  | \$10,000,001<br>to \$50<br>million  | \$50,000,001<br>to \$100<br>million                                 | \$100,000,001<br>to \$500<br>million | \$500,000,001 to \$1 billion   |   |  |   |                                     |

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**B1** (Official Form 1)(04/13) Page 2 Name of Debtor(s): Voluntary Petition Mapes, Mary Lynn (This page must be completed and filed in every case) All Prior Bankruptcy Cases Filed Within Last 8 Years (If more than two, attach additional sheet) Case Number: Date Filed: Location Where Filed: - None -Date Filed: Location Case Number: Where Filed: Pending Bankruptcy Case Filed by any Spouse, Partner, or Affiliate of this Debtor (If more than one, attach additional sheet) Name of Debtor: Case Number: Date Filed: - None -District: Relationship: Judge: Exhibit B Exhibit A (To be completed if debtor is an individual whose debts are primarily consumer debts.) (To be completed if debtor is required to file periodic reports (e.g., I, the attorney for the petitioner named in the foregoing petition, declare that I forms 10K and 10Q) with the Securities and Exchange Commission have informed the petitioner that [he or she] may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 under each such chapter. I further certify that I delivered to the debtor the notice required by 11 U.S.C. §342(b). and is requesting relief under chapter 11.) ☐ Exhibit A is attached and made a part of this petition. Signature of Attorney for Debtor(s) (Date) Exhibit C Does the debtor own or have possession of any property that poses or is alleged to pose a threat of imminent and identifiable harm to public health or safety? Yes, and Exhibit C is attached and made a part of this petition. No. Exhibit D (To be completed by every individual debtor. If a joint petition is filed, each spouse must complete and attach a separate Exhibit D.) Exhibit D completed and signed by the debtor is attached and made a part of this petition. If this is a joint petition: ☐ Exhibit D also completed and signed by the joint debtor is attached and made a part of this petition. Information Regarding the Debtor - Venue (Check any applicable box) Debtor has been domiciled or has had a residence, principal place of business, or principal assets in this District for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other District. There is a bankruptcy case concerning debtor's affiliate, general partner, or partnership pending in this District. Debtor is a debtor in a foreign proceeding and has its principal place of business or principal assets in the United States in this District, or has no principal place of business or assets in the United States but is a defendant in an action or proceeding [in a federal or state court] in this District, or the interests of the parties will be served in regard to the relief sought in this District. Certification by a Debtor Who Resides as a Tenant of Residential Property (Check all applicable boxes) Landlord has a judgment against the debtor for possession of debtor's residence. (If box checked, complete the following.) (Name of landlord that obtained judgment) (Address of landlord) Debtor claims that under applicable nonbankruptcy law, there are circumstances under which the debtor would be permitted to cure the entire monetary default that gave rise to the judgment for possession, after the judgment for possession was entered, and Debtor has included with this petition the deposit with the court of any rent that would become due during the 30-day period after the filing of the petition. Debtor certifies that he/she has served the Landlord with this certification. (11 U.S.C. § 362(l)).

B1 (Official Form 1)(04/13) Voluntary Petition

petition is true and correct.

Document

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Name of Debtor(s):

Mapes, Mary Lynn

(This page must be completed and filed in every case)

Signatures

#### Signature of a Foreign Representative

I declare under penalty of perjury that the information provided in this petition is true and correct, that I am the foreign representative of a debtor in a foreign proceeding, and that I am authorized to file this petition.

(Check only one box.)

- ☐ I request relief in accordance with chapter 15 of title 11. United States Code. Certified copies of the documents required by 11 U.S.C. §1515 are attached.
- Pursuant to 11 U.S.C. §1511, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached.

Signature of Foreign Representative

Printed Name of Foreign Representative

Date

#### Signature of Non-Attorney Bankruptcy Petition Preparer

I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h), and 342(b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19 is attached.

Printed Name and title, if any, of Bankruptcy Petition Preparer

Social-Security number (If the bankrutpcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.)(Required by 11 U.S.C. § 110.)

Address

Date

Signature of bankruptcy petition preparer or officer, principal, responsible person or partner whose Social Security number is provided above.

Names and Social-Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual:

If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.

A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 11 U.S.C. §110; 18 U.S.C. §156.

#### chapter 7, 11, 12, or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7. [If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by 11 U.S.C. §342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

Signature(s) of Debtor(s) (Individual/Joint)

[If petitioner is an individual whose debts are primarily consumer debts and

has chosen to file under chapter 7] I am aware that I may proceed under

I declare under penalty of perjury that the information provided in this

Signatur of Debtor Mary Lynn Mapes

Signature of Joint Debtor

Telephone Number (If not represented by attorney)

Date

Signature of Attorney\*

Attorney for Debtor(s)

Meghan N. Bolte 6302434

Printed Name of Attorney for Debtor(s)

Bernard J. Natale, Ltd

Firm Name

6833 Stalter Dr., Suite 201 Rockford, IL 61108

Address

Email: natalelaw@bjnatalelaw.com (815) 964-4700 Fax: (815) 316-4646

Telephone Number

Date

\*In a case in which § 707(b)(4)(D) applies, this signature also constitutes a certification that the attorney has no knowledge after an inquiry that the information in the schedules is incorrect.

#### Signature of Debtor (Corporation/Partnership)

I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor.

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

Signature of Authorized Individual

Printed Name of Authorized Individual

Title of Authorized Individual

Date

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B 1D (Official Form 1, Exhibit D) (12/09)

### United States Bankruptcy Court Northern District of Illinois

| In re | Mary Lynn Mapes |           | Case No. |   |
|-------|-----------------|-----------|----------|---|
|       |                 | Debtor(s) | Chapter  | 7 |

# EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH CREDIT COUNSELING REQUIREMENT

Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.

Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.

- 1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. *Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency*.
- □ 2. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 14 days after your bankruptcy case is filed.
- □ 3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the seven days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. [Summarize exigent circumstances here.] \_\_\_\_

If your certification is satisfactory to the court, you must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy petition and promptly file a certificate from the agency that provided the counseling, together with a copy of any debt management plan developed through the agency. Failure to fulfill these requirements may result in dismissal of your case. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. Your case may also be dismissed if the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing.

☐ 4. I am not required to receive a credit counseling briefing because of: [Check the applicable statement.] [Must be accompanied by a motion for determination by the court.]

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| D (Official Form 1, Exhibit D) (12/09) - Cont. Page 2  |
|--|
| ☐ Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by reason of mental illness or mental deficiency so as to be incapable of realizing and making rational decisions with respect to financial responsibilities.);  |
| ☐ Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically impaired to the extent of being unable, after reasonable effort, to participate in a credit counseling briefing in person, by telephone, or through the Internet.);  ☐ Active military duty in a military combat zone. |
| ☐ 5. The United States trustee or bankruptcy administrator has determined that the credit counseling quirement of 11 U.S.C. § 109(h) does not apply in this district.  |
| I certify under penalty of perjury that the information provided above is true and correct.  |
| Signature of Debtor: May Lynn Mapes  |
| Date: <u>6-29-15</u>   |

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B6 Summary (Official Form 6 - Summary) (12/14)

# **United States Bankruptcy Court Northern District of Illinois**

| In re | Mary Lynn Mapes |        | Case No |   |  |
|-------|-----------------|--------|---------|---|--|
| •     |                 | Debtor | ,       |   |  |
|       |                 |        | Chapter | 7 |  |
|       |                 |        |         | - |  |

### **SUMMARY OF SCHEDULES**

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors must also complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

| NAME OF SCHEDULE   | ATTACHED<br>(YES/NO) | NO. OF<br>SHEETS | ASSETS            | LIABILITIES | OTHER    |
|--|----------------------|------------------|-------------------|-------------|----------|
| A - Real Property  | Yes                  | 1                | 192,000.00        |             |          |
| B - Personal Property  | Yes                  | 4                | 114,255.00        |             |          |
| C - Property Claimed as Exempt   | Yes                  | 1                |                   |             |          |
| D - Creditors Holding Secured Claims   | Yes                  | 1                |                   | 311,420.92  |          |
| E - Creditors Holding Unsecured<br>Priority Claims (Total of Claims on Schedule E) | Yes                  | 9                |                   | 188,438.06  |          |
| F - Creditors Holding Unsecured<br>Nonpriority Claims                              | Yes                  | 11               |                   | 310,900.49  |          |
| G - Executory Contracts and<br>Unexpired Leases                                    | Yes                  | 1                |                   |             |          |
| H - Codebtors  | Yes                  | 10               |                   |             |          |
| I - Current Income of Individual<br>Debtor(s)                                      | Yes                  | 5                |                   |             | 3,857.00 |
| J - Current Expenditures of Individual<br>Debtor(s)                                | Yes                  | 2                |                   |             | 5,049.00 |
| Total Number of Sheets of ALL Schedules  |                      | 45               |                   |             |          |
|  | T                    | otal Assets      | 306,255.00        |             |          |
|  |                      |                  | Total Liabilities | 810,759.47  |          |

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B 6 Summary (Official Form 6 - Summary) (12/14)

## United States Bankruptcy Court Northern District of Illinois

| Northern Distric   | ct of Illinois  |  |                           |
|--|---|--|---------------------------|
| Mary Lynn Mapes  |   | Case No.   |                           |
| Ι  | Debtor ,  | Chapter  | 7                         |
| STATISTICAL SUMMARY OF CERTAIN LLA  If you are an individual debtor whose debts are primarily consumer de a case under chapter 7, 11 or 13, you must report all information reque  Check this box if you are an individual debtor whose debts are report any information here.  This information is for statistical purposes only under 28 U.S.C. § Summarize the following types of liabilities, as reported in the Sch | ebts, as defined in § sested below.  NOT primarily constants. | 101(8) of the Bankruptcy (umer debts. You are not re | Code (11 U.S.C.§ 101(8)), |
| Type of Liability  | Amount  |  |                           |
| Domestic Support Obligations (from Schedule E)   |   |  |                           |
| Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E)   |   |  |                           |
| Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed)  |   |  |                           |
| Student Loan Obligations (from Schedule F)   |   |  |                           |
| Domestic Support, Separation Agreement, and Divorce Decree<br>Obligations Not Reported on Schedule E   |   |  |                           |
| Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)  |   |  |                           |
| TOTAL  |   |  |                           |
| State the following:   |   |  |                           |
| Average Income (from Schedule I, Line 12)  |   |  |                           |
| Average Expenses (from Schedule J, Line 22)  |   |  |                           |
| Current Monthly Income (from Form 22A-1 Line 11; OR, Form 22B Line 14; OR, Form 22C-1 Line 14)   |   |  |                           |
| State the following:   |   |  |                           |
| Total from Schedule D, "UNSECURED PORTION, IF ANY" column  |   |  |                           |
| 2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column   |   |  |                           |
| 3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column   |   |  |                           |
| 4. Total from Schedule F   |   |  |                           |
| 5. Total of non-priority unsecured debt (sum of 1, 3, and 4)   |   |  |                           |

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B6A (Official Form 6A) (12/07)

| In re | Mary Lynn Mapes | Case No. |  |
|-------|-----------------|----------|--|
| -     |                 | D-14     |  |
|       |                 | L)ehtor  |  |

#### **SCHEDULE A - REAL PROPERTY**

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a cotenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor's own benefit. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim." If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C - Property Claimed as Exempt.

| Real estate located at 1237 Mason Street, DeKalb IL |  | -   | 192,000.00   | 175,000.00                 |
|---|--|---|--|----------------------------|
| Description and Location of Property                | Nature of Debtor's<br>Interest in Property | Husband,<br>Wife,<br>Joint, or<br>Community | Current Value of<br>Debtor's Interest in<br>Property, without<br>Deducting any Secured<br>Claim or Exemption | Amount of<br>Secured Claim |

Sub-Total > **192,000.00** (Total of this page)

Total > 192,000.00

**0** continuation sheets attached to the Schedule of Real Property

(Report also on Summary of Schedules)

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B6B (Official Form 6B) (12/07)

| In re | Mary Lynn Mapes | Case No. |  |
|-------|-----------------|----------|--|
| _     |                 | Debtor   |  |

#### SCHEDULE B - PERSONAL PROPERTY

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property." If the property is being held for a minor child, simply state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

|     | Type of Property  | N<br>O<br>N<br>E | Description and Location of Property   | Husband,<br>Wife,<br>Joint, or<br>Community | Current Value of<br>Debtor's Interest in Property,<br>without Deducting any<br>Secured Claim or Exemption |
|-----|---|------------------|--|---|---|
| 1.  | Cash on hand  | X                |  |   |   |
| 2.  | Checking, savings or other financial accounts, certificates of deposit, or shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or cooperatives. |                  | gs account at Resource Bank (joint with r son; funds are son's from soical security) | J   | 400.00  |
| 3.  | Security deposits with public utilities, telephone companies, landlords, and others.  | X                |  |   |   |
| 4.  | Household goods and furnishings, including audio, video, and computer equipment.  |                  | al complement of household goods and shings  | J   | 2,500.00  |
| 5.  | Books, pictures and other art<br>objects, antiques, stamp, coin,<br>record, tape, compact disc, and<br>other collections or collectibles.   | X                |  |   |   |
| 6.  | Wearing apparel.  | Norm             | al complement of clothing  | J   | 500.00  |
| 7.  | Furs and jewelry.   | X                |  |   |   |
| 8.  | Firearms and sports, photographic, and other hobby equipment.   | X                |  |   |   |
| 9.  | Interests in insurance policies. Name insurance company of each   | Term             | life insurance policy through Pekin Insurance  | -   | 1.00  |
|     | policy and itemize surrender or refund value of each.   | Term             | life insurance through Genworth  | -   | 1.00  |
| 10. | Annuities. Itemize and name each issuer.  | X                |  |   |   |
|     |   |                  |  | Sub-Tota                                    | al > <b>3.402.00</b>  |
|     |   |                  | (Total   | of this page)                               | ui > 0,702.00   |

**<sup>3</sup>** continuation sheets attached to the Schedule of Personal Property

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B6B (Official Form 6B) (12/07) - Cont.

| In re | Mary Lynn Mapes | Case No |
|-------|-----------------|---------|
|       |                 | •       |

Debtor

## SCHEDULE B - PERSONAL PROPERTY (Continuation Sheet)

|     |   |                  | (Continuation Sheet)   |          |   |   |
|-----|---|------------------|--|----------|---|---|
|     | Type of Property  | N<br>O<br>N<br>E | Description and Location of Property   |          | Husband,<br>Wife,<br>Joint, or<br>community | Current Value of<br>Debtor's Interest in Property,<br>without Deducting any<br>Secured Claim or Exemption |
| 11. | Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c).) | х                |  |          |   |   |
| 12. | Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give particulars.   | X                |  |          |   |   |
| 13. | Stock and interests in incorporated and unincorporated businesses. Itemize.   |                  | 100% owner of Ecosteam Corp<br>No value as the business filed a Chapter 11 that<br>was converted to a Chapter 7  | at       | -   | 0.00  |
| 14. | Interests in partnerships or joint ventures. Itemize.   | X                |  |          |   |   |
| 15. | Government and corporate bonds and other negotiable and nonnegotiable instruments.  | X                |  |          |   |   |
| 16. | Accounts receivable.  |                  | Loans made to Ecosteam Corporation<br>Uncollectible - Ecosteam Corporation filed a<br>Chapter 11 bankruptcy that was converted to a<br>Chapter 7 in January 2014 | 1        | -   | 108,203.00  |
| 17. | Alimony, maintenance, support, and property settlements to which the debtor is or may be entitled. Give particulars.  | X                |  |          |   |   |
| 18. | Other liquidated debts owed to debtor including tax refunds. Give particulars.  | X                |  |          |   |   |
| 19. | Equitable or future interests, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A - Real Property.  | X                |  |          |   |   |
| 20. | Contingent and noncontingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust.  | X                |  |          |   |   |
|     |   |                  |  | _        |   |   |
|     |   |                  |  | Total of | Sub-Tota<br>this page)                      | al > 108,203.00   |

Sheet <u>1</u> of <u>3</u> continuation sheets attached to the Schedule of Personal Property

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B6B (Official Form 6B) (12/07) - Cont.

| In re | Mary Lynn Mapes | Case No |
|-------|-----------------|---------|
|       |                 |         |

Debtor

# SCHEDULE B - PERSONAL PROPERTY (Continuation Sheet)

|  | Type of Property  | N<br>O<br>N<br>E | Description and Location of Property | Husband,<br>Wife,<br>Joint, or<br>Community | Current Val<br>Debtor's Interest i<br>without Deduc<br>Secured Claim or | n Property,<br>ting any |
|--|---|------------------|--------------------------------------|---|---|-------------------------|
| clai<br>tax<br>deb                         | ner contingent and unliquidated<br>ims of every nature, including<br>refunds, counterclaims of the<br>otor, and rights to setoff claims.<br>we estimated value of each.   | X                |                                      |   |   |                         |
| inte                                       | tents, copyrights, and other ellectual property. Give ticulars.   | X                |                                      |   |   |                         |
| gen  | eenses, franchises, and other<br>neral intangibles. Give<br>ticulars.   | X                |                                      |   |   |                         |
| con<br>info<br>§ 10<br>by i<br>obta<br>the | stomer lists or other compilations nataining personally identifiable ormation (as defined in 11 U.S.C. 01(41A)) provided to the debtor individuals in connection with saining a product or service from debtor primarily for personal, nily, or household purposes. | X                |                                      |   |   |                         |
| 25. Aut                                    | tomobiles, trucks, trailers, and er vehicles and accessories.   | X                |                                      |   |   |                         |
| 26. Boa                                    | ats, motors, and accessories.   | X                |                                      |   |   |                         |
| 27. Air                                    | craft and accessories.  | X                |                                      |   |   |                         |
|  | fice equipment, furnishings, and oplies.  | X                |                                      |   |   |                         |
| 29. Ma<br>sup                              | achinery, fixtures, equipment, and oplies used in business.   | X                |                                      |   |   |                         |
| 30. Inv                                    | rentory.  | X                |                                      |   |   |                         |
| 31. Ani                                    | imals.  | 1 Cat            |                                      | -   |   | 25.00                   |
|  |   | 1 Dog            |                                      | -   |   | 25.00                   |
|  | ops - growing or harvested. Give ticulars.  | X                |                                      |   |   |                         |
|  | ming equipment and plements.  | X                |                                      |   |   |                         |
| 34. Far                                    | rm supplies, chemicals, and feed.   | X                |                                      |   |   |                         |
|  |   |                  | (T)                                  | Sub-Tota<br>otal of this page)              | al >  | 50.00                   |

Sheet **2** of **3** continuation sheets attached to the Schedule of Personal Property

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B6B (Official Form 6B) (12/07) - Cont.

| In | re Mary Lynn Mapes   |                                  | Case  | No  |   |
|----|--|----------------------------------|---|---|---|
|    |  |                                  | Debtor  |   |   |
|    |  | SCHEDU                           | ILE B - PERSONAL PROPERTY (Continuation Sheet)  |   |   |
|    | Type of Property   | N<br>O<br>N<br>E                 | Description and Location of Property  | Husband,<br>Wife,<br>Joint, or<br>Community | Current Value of<br>Debtor's Interest in Property,<br>without Deducting any<br>Secured Claim or Exemption |
|    | Other personal property of any kind not already listed. Itemize. | Debtor a<br>Camry t<br>insurance | ce Check and non-filing spouse owned a 2004 Toyota hat was totaled. Received check from ce company that will be used towards the se of a different vehicle. | J   | 2,600.00  |

| Sub-Total > 2,600.00 (Total of this page) | Total > 114,255.00 Case 15-81721 Doc 1 Filed 06/30/15 Entered 06/30/15 14:38:32 Desc Main Document Page 13 of 72

B6C (Official Form 6C) (4/13)

| In re | Mary Lynn Mapes |        | Case No |  |
|-------|-----------------|--------|---------|--|
|       |                 | Debtor |         |  |

#### SCHEDULE C - PROPERTY CLAIMED AS EXEMPT

| SCHEDULE C  | - PROPERTY CLAIM                                 | ED AS EXEMPT  |   |
|---|--|---|---|
| Debtor claims the exemptions to which debtor is entitled to (Check one box)  ☐ 11 U.S.C. §522(b)(2)  ☐ 11 U.S.C. §522(b)(3)                           |  | c if debtor claims a homestead exer<br>675. (Amount subject to adjustment on 4/1/<br>with respect to cases commenced on a | 16, and every three years thereas                           |
| Description of Property   | Specify Law Providing<br>Each Exemption          | Value of<br>Claimed<br>Exemption  | Current Value of<br>Property Without<br>Deducting Exemption |
| Real Property<br>Real estate located at 1237 Mason Street,<br>DeKalb IL 60115   | 735 ILCS 5/12-901                                | 15,000.00   | 192,000.00  |
| Checking, Savings, or Other Financial Accounts, C<br>Savings account at Resource Bank (joint with<br>minor son; funds are son's from soical security) | Sertificates of Deposit<br>735 ILCS 5/12-1001(b) | 400.00  | 400.00  |
| Household Goods and Furnishings<br>Normal complement of household goods and<br>furnishings  | 735 ILCS 5/12-1001(b)                            | 2,500.00  | 2,500.00  |
| Wearing Apparel<br>Normal complement of clothing  | 735 ILCS 5/12-1001(a)                            | 500.00  | 500.00  |
| Interests in Insurance Policies Term life insurance policy through Pekin  | 735 ILCS 5/12-1001(f)                            | 100%  | 1.00  |

735 ILCS 5/12-1001(f)

735 ILCS 5/12-1001(b)

Other Personal Property of Any Kind Not Already Listed Insurance Check 735 I Debtor and non-filing spouse owned a 2004 Toyota Camry that was totaled. Received check from insurance company that will be used towards the purchase of a different vehicle.

Term life insurance through Genworth

Insurance

| Total: 10 502 00 200 602 00 |        |           |            |
|-----------------------------|--------|-----------|------------|
|                             | Total: | 19.502.00 | 200,602,00 |

100%

1,100.00

1.00

5,200.00

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B6D (Official Form 6D) (12/07)

| In re | Mary Lynn Mapes | Case No                               |  |
|-------|-----------------|---------------------------------------|--|
|       |                 | , , , , , , , , , , , , , , , , , , , |  |
|       |                 | Debtor                                |  |

#### SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is a creditor, the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor", include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H", "W", "J", or "C" in the column labeled "Husband, Wife, Joint, or Community".

If the claim is contingent, place an "X" in the column labeled "Contingent". If the claim is unliquidated, place an "X" in the column labeled "Unliquidated". If the claim is disputed, place an "X" in the column labeled "Disputed". (You may need to place an "X" in more than one of these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Unsecured Portion" on the Statistical Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion" on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

| CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | C O D E B T O R | M<br>H | DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN | COXFLXGEX     | α>_         | S   | AMOUNT OF<br>CLAIM<br>WITHOUT<br>DEDUCTING<br>VALUE OF<br>COLLATERAL | UNSECURED<br>PORTION, IF<br>ANY |
|--|-----------------|--------|--|---------------|-------------|-----|--|---------------------------------|
| Account No.  |                 |        | Mortgage   | T             | DATED       |     |  |                                 |
| JP Morgan Chase<br>Chase Bank, USA, NA<br>131 S. Dearborn St Floor 5<br>Chicago, IL 60603            |                 | -      | Real estate located at 1237 Mason<br>Street, DeKalb IL 60115                                   |               | ט           |     |  |                                 |
|  | ╧               |        | Value \$ 192,000.00  |               |             |     | 175,000.00   | 0.00                            |
| Account No. xxxxxx6982   |                 |        | 12/24/2009   |               |             |     |  |                                 |
| Rockford Bank & Trust Company<br>PO Box 1748<br>Rockford, IL 61110                                   | x               | -      | Blanket UCC Business Assets All assets - ARC loan 2 of 5 years no interest.                    |               |             |     |  |                                 |
|  |                 |        | Value \$ 39,237.00   |               |             |     | 55,551.96  | 55,551.96                       |
| Account No. xxxxxx8301   |                 | T      | 04/18/2008   |               |             |     | ·  | ·                               |
| Rockford Bank & Trust Company<br>PO Box 1748<br>Rockford, IL 61110                                   | x               | -      | Blanket UCC Business Assets All assets   |               |             |     |  |                                 |
|  | _               | _      | Value \$ 39,237.00   |               |             |     | 80,868.96  | 41,631.96                       |
| Account No.  |                 |        | Value \$   | _             |             |     |  |                                 |
| continuation sheets attached   |                 |        | (Total of t  | Subt<br>his 1 |             |     | 311,420.92   | 97,183.92                       |
|  |                 |        | (Report on Summary of So   | _             | ota<br>lule | - 1 | 311,420.92   | 97,183.92                       |

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B6E (Official Form 6E) (4/13)

| In re | Mary Lynn Mapes | Case No. |  |
|-------|-----------------|----------|--|
| -     |                 | Debtor   |  |

#### SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

<sup>\*</sup> Amount subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

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B6E (Official Form 6E) (4/13) - Cont.

| In re | Mary Lynn Mapes | Case No.    |
|-------|-----------------|-------------|
| _     |                 | ,<br>Debtor |

## SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

(Continuation Sheet)

**Taxes and Certain Other Debts Owed to Governmental Units** 

TYPE OF PRIORITY

|   |          |             |  |            |                  |        | TYPE OF PRIORITY   |  |
|---|----------|-------------|--|------------|------------------|--------|--------------------|--|
| CREDITOR'S NAME,  | C        | Нι          | sband, Wife, Joint, or Community                       | CO         | U                | D      |                    | AMOUNT NOT   |
| AND MAILING ADDRESS<br>INCLUDING ZIP CODE,<br>AND ACCOUNT NUMBER<br>(See instructions.)             | CODEBTOR | C<br>A<br>H | DATE CLAIM WAS INCURRED<br>AND CONSIDERATION FOR CLAIN | vI NT NGEN | 1 G D L D        | SPUTED | AMOUNT<br>OF CLAIM | ENTITLED TO<br>PRIORITY, IF ANY  AMOUNT<br>ENTITLED TO<br>PRIORITY |
| Account No. xxx6474   |          |             | 09/2013  | Т          | A<br>T<br>E<br>D |        |                    |  |
| IDES<br>Collections Section<br>33 S. State Street, 10th Floor<br>Chicago, IL 60603-2802             | x        | -           | 3rd Quarter 2013 Payroll Taxes                         |            |                  |        | 830.08             | 0.00   |
| Account No. xxx6474   | ┪        |             | 06/2013  |            |                  |        |                    |  |
| IDES<br>Collections Section<br>33 S. State Street, 10th Floor<br>Chicago, IL 60603-2802             | x        | -           | 2nd Quarter 2013 Payroll Taxes                         |            |                  |        |                    | 0.00   |
|   | 4        |             |  |            |                  |        | 1,558.19           | 1,558.19   |
| Account No. xxx6474   | 4        |             | 03/2013  |            |                  |        |                    | 1  |
| IDES<br>Collections Section<br>33 S. State Street, 10th Floor<br>Chicago, IL 60603-2802             | x        | -           | 1st Quarter 2013 Payroll Taxes                         |            |                  |        |                    | 0.00   |
|   |          |             |  |            |                  |        | 1,440.37           | 1,440.37   |
| Account No. xxx6474   |          |             | 12/2012  |            |                  |        |                    |  |
| IDES<br>Collections Section<br>33 S. State Street, 10th Floor<br>Chicago, IL 60603-2802             | x        | -           | 4th Quarter 2012 Payroll Taxes                         |            |                  |        |                    | 0.00   |
| 247.  | 4        |             | 20/0040  |            |                  |        | 851.63             | 851.63   |
| Account No. xxx6474  IDES Collections Section 33 S. State Street, 10th Floor Chicago, IL 60603-2802 | x        | -           | 09/2012  3rd Quarter 2012 Payroll Taxes                |            |                  |        | 906.60             | 906.60   |
| Sheet 1 of 8 continuation sheets at   | ache     | d to        |  | Sub        | tota             | al     |                    | 0.00   |
| Schedule of Creditors Holding Unsecured Pr  |          |             |  | al of this | pa               | ge)    | 5,586.87           | 5,586.87   |

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B6E (Official Form 6E) (4/13) - Cont.

| In re | Mary Lynn Mapes | Case No. |
|-------|-----------------|----------|
| -     |                 | Debtor   |

#### SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

(Continuation Sheet)

Taxes and Certain Other Debts
Owed to Governmental Units

TYPE OF PRIORITY CODEBTOR Husband, Wife, Joint, or Community AMOUNT NOT ENTITLED TO PRIORITY, IF ANY CREDITOR'S NAME, NLIQUIDATED ONTINGENT S P U T E D AND MAILING ADDRESS Н DATE CLAIM WAS INCURRED **AMOUNT** INCLUDING ZIP CODE, W AND CONSIDERATION FOR CLAIM OF CLAIM AMOUNT ENTITLED TO PRIORITY AND ACCOUNT NUMBER J С (See instructions.) 06/2012 Account No. xxx6474 2nd Quarter 2012 Payroll Taxes **IDES** 0.00 **Collections Section** 33 S. State Street. 10th Floor Χ Chicago, IL 60603-2802 4,130.02 4,130.02 Account No. xxx8474 03/2012 1st Quarter 2012 Payroll Taxes **IDES** 0.00 **Collections Section** 33 S. State Street, 10th Floor Χ Chicago, IL 60603-2802 2.500.95 2.500.95 12/2011 Account No. xxx8474 4th Quarter 2011 Payroll Taxes 0.00 **Collections Section** 33 S. State Street, 10th Floor Χ Chicago, IL 60603-2802 1,502.87 1,502.87 09/2011 Account No. xxx8474 3rd Quarter 2011 Payroll Taxes **IDES** 0.00 **Collections Section** 33 S. State Street, 10th Floor x | -Chicago, IL 60603-2802 3,602.14 3,602.14 06/2011 Account No. xxx8474 2nd Quarter 2011 Payroll Taxes **IDES** 0.00 **Collections Section** 33 S. State Street, 10th Floor Χ Chicago, IL 60603-2802 5,475.83 5,475.83 Subtotal 0.00 Sheet **2** of **8** continuation sheets attached to (Total of this page) Schedule of Creditors Holding Unsecured Priority Claims 17,211.81 17,211.81

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B6E (Official Form 6E) (4/13) - Cont.

| In re | Mary Lynn Mapes |        | Case No. |  |
|-------|-----------------|--------|----------|--|
| _     |                 | Debtor |          |  |

### SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

(Continuation Sheet)

Taxes and Certain Other Debts
Owed to Governmental Units

TYPE OF PRIORITY UNLLQULDATED CODEBTOR Husband, Wife, Joint, or Community AMOUNT NOT ENTITLED TO PRIORITY, IF ANY CREDITOR'S NAME, ONTINGENT S P U T E D AND MAILING ADDRESS Н DATE CLAIM WAS INCURRED **AMOUNT** INCLUDING ZIP CODE, W AND CONSIDERATION FOR CLAIM OF CLAIM AMOUNT ENTITLED TO PRIORITY AND ACCOUNT NUMBER C (See instructions.) 3/2011 Account No. xxx6474 1st Quarter 2011 Payroll Taxes **IDES** 0.00 **Collections Section** 33 S. State Street. 10th Floor Χ Chicago, IL 60603-2802 5,266.01 5,266.01 Account No. xxxxxx6999 09/2013 3rd Quarter 2013 Payroll Taxes Illinois Department of Revenue 0.00 **Bankruptcy Section** PO Box 64338 Χ Chicago, IL 60664-0338 974.49 974.49 Account No. xxxxx6999 06/2013 2nd Quarter 2013 Payroll Taxes Illinois Department of Revenue 0.00 **Bankruptcy Section** PO Box 64338 Χ Chicago, IL 60664-0338 1,441.50 1,441.50 Account No. xxxxx6999 03/2013 1st Quarter 2013 Payroll Taxes Illinois Department of Revenue 0.00 **Bankruptcy Section** PO Box 64338  $\mathbf{x}$ Chicago, IL 60664-0338 1,202.45 1,202.45 12/2012 Account No. xxxxx6999 4th Quarter 2012 Payroll Taxes Illinois Department of Revenue 0.00 **Bankruptcy Section** PO Box 64338 Χ Chicago, IL 60664-0338 1,496.64 1,496.64 Subtotal 0.00 Sheet 3 of 8 continuation sheets attached to (Total of this page) Schedule of Creditors Holding Unsecured Priority Claims 10,381.09 10,381.09

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B6E (Official Form 6E) (4/13) - Cont.

| In re | Mary Lynn Mapes | Case No.    |
|-------|-----------------|-------------|
| _     |                 | ,<br>Debtor |

### SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

(Continuation Sheet)

Taxes and Certain Other Debts
Owed to Governmental Units

| TYPE OF PRIORITY   |                 |                        |   |           |                  |                  | 7                  |  |
|--|-----------------|------------------------|---|-----------|------------------|------------------|--------------------|--|
| CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)              | C O D E B T O R | Hu<br>H<br>W<br>J<br>C | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM               | CONTINGEN | UNLIQUIDA        | U<br>T<br>E<br>D | AMOUNT<br>OF CLAIM | AMOUNT NOT<br>ENTITLED TO<br>PRIORITY, IF ANY<br>AMOUNT<br>ENTITLED TO<br>PRIORITY |
| Account No. xxxxx6999  |                 |                        | 09/2012   | ٦         | A<br>T<br>E<br>D |                  |                    |  |
| Illinois Department of Revenue<br>Bankruptcy Section<br>PO Box 64338<br>Chicago, IL 60664-0338               | x               | -                      | 3rd Quarter 2012 Payroll Taxes                                    |           |                  |                  | 1,816.64           | 1,816.64   |
| Account No. xxxxx6999  |                 |                        | 06/2012   |           |                  | H                | 1,010.04           | 1,010.04   |
| Illinois Department of Revenue<br>Bankruptcy Section<br>PO Box 64338<br>Chicago, IL 60664-0338               | x               | -                      | 2nd Quarter 2012 Payroll Taxes                                    |           |                  |                  |                    | 0.00   |
|  |                 |                        |   |           |                  |                  | 2,777.29           | 2,777.29   |
| Account No. xxxxx6999  Illinois Department of Revenue Bankruptcy Section PO Box 64338 Chicago, IL 60664-0338 | x               | _                      | 03/2012  1st Quarter 2012 Payroll Taxes plus penalty and interest |           |                  |                  |                    | 0.00   |
|  | 4               | _                      | 12/2011   | _         |                  |                  | 2,548.93           | 2,548.93   |
| Account No. xxxxx6999  Illinois Department of Revenue Bankruptcy Section PO Box 64338 Chicago, IL 60664-0338 | x               | -                      | 4th Quarter 2011 Payroll Taxes plus penalty and interest          |           |                  |                  | 2 000 52           | 0.00   |
| Account No. xxxxx6999  | $\dashv$        | -                      | 09/2011   | -         |                  | H                | 3,099.52           | 3,099.52   |
| Illinois Department of Revenue<br>Bankruptcy Section<br>PO Box 64338<br>Chicago, IL 60664-0338               | x               | -                      | 3rd Quarter 2011 Payroll Taxes plus penalty and interest          |           |                  |                  | 4,461.45           | 0.00<br>4,461.45   |
| Sheet 4 of 8 continuation sheets   | attache         | L<br>d te              | <u> </u>  | Subt      | ota              | ıl               | 1,101110           | 0.00   |
| Schedule of Creditors Holding Unsecured  |                 |                        |   | his       | pag              | ge)              | 14,703.83          | 14,703.83  |

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| In re | Mary Lynn Mapes | Case No |  |
|-------|-----------------|---------|--|
| -     |                 | Debtor  |  |

### SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

(Continuation Sheet)

**Taxes and Certain Other Debts Owed to Governmental Units** 

| TYPE OF PRIORITY   |                 |                        |  |           |                  |          |                    |                  |   |
|--|-----------------|------------------------|--|-----------|------------------|----------|--------------------|------------------|---|
| CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)  | C O D E B T O R | Hu<br>H<br>W<br>J<br>C | sband, Wife, Joint, or Community  DATE CLAIM WAS INCURRED  AND CONSIDERATION FOR CLAIM | CONTINGEN | UNLIQUIDA        | SPUTED   | AMOUNT<br>OF CLAIM | ENTITI<br>PRIORI | NT NOT LED TO TY, IF ANY  AMOUNT ENTITLED TO PRIORITY |
| Account No. xxxxx6999  |                 |                        | 06/2011  | ٦         | A<br>T<br>E<br>D |          |                    |                  |   |
| Illinois Department of Revenue<br>Bankruptcy Section<br>PO Box 64338<br>Chicago, IL 60664-0338   | x               | -                      | 2nd Quarter 2011 Payroll Taxes plus penalty and interest                               |           |                  |          | 4.400.44           | 0.00             | 4 4 6 0 4 4   |
| Account No. xxxxx6999  | +               |                        | 03/2011  | +         |                  | $\vdash$ | 4,160.41           |                  | 4,160.41  |
| Illinois Department of Revenue<br>Bankruptcy Section<br>PO Box 64338<br>Chicago, IL 60664-0338   | x               | -                      | 1st Quarter 2011 Payroll Taxes plus penalty and interest                               |           |                  |          | 0.045.50           | 0.00             | 0.045.50  |
| Account No. xxxxx6999  | $\dashv$        | -                      | 09/2013  | +         | _                | ┝        | 2,615.50           |                  | 2,615.50  |
| Internal Revenue Service<br>Centralized Insolvency<br>PO Box 7346<br>Philadelphia, PA 19101-7346 | x               | -                      | 3rd Quarter 2013 Payroll Taxes   |           |                  |          |                    | 0.00             |   |
| Account No. xxxxx6999  | +               | _                      | 06/2013  | +         |                  |          | 4,763.38           |                  | 4,763.38  |
| Internal Revenue Service Centralized Insolvency PO Box 7346 Philadelphia, PA 19101-7346          | x               | -                      | 2nd Quarter 2013 Payroll Taxex   |           |                  |          |                    | 0.00             |   |
| Account No. xxxxx6999  | ╅               | -                      | 01/2013  | +         |                  |          | 6,525.91           |                  | 6,525.91  |
| Internal Revenue Service<br>Centralized Insolvency<br>PO Box 7346<br>Philadelphia, PA 19101-7346 | x               | -                      | 1st Quarter 2013 Payroll Taxes   |           |                  |          | 5.064.02           | 0.00             | 5,064.03  |
| G1 . F . G . Q   |                 | <u>L</u>               |  | <br>Subi  | ota              | <br>1    | 5,064.03           | 0.00             | 5,064.03  |
| Sheet <u>5</u> of <u>8</u> continuation sheets a Schedule of Creditors Holding Unsecured 1       |                 |                        |  |           |                  |          | 23,129.23          | 0.00             | 23,129.23   |

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B6E (Official Form 6E) (4/13) - Cont.

| In re | Mary Lynn Mapes |        | Case No. |  |
|-------|-----------------|--------|----------|--|
| _     |                 | Debtor |          |  |

## SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

(Continuation Sheet)

Taxes and Certain Other Debts
Owed to Governmental Units

|  |                 |                        |   |           |                  |      | TYPE OF PRIORITY   | 7  |
|--|-----------------|------------------------|---|-----------|------------------|------|--------------------|--|
| CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)                | C O D E B T O R | Hu<br>H<br>W<br>J<br>C | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM | CONTINGEN | UNLIQUIDA        | UTED | AMOUNT<br>OF CLAIM | AMOUNT NOT<br>ENTITLED TO<br>PRIORITY, IF ANY<br>AMOUNT<br>ENTITLED TO<br>PRIORITY |
| Account No. xxxxx6999  |                 |                        | 12/2012   | ĪΪ        | A<br>T<br>E<br>D |      |                    |  |
| Internal Revenue Service<br>Centralized Insolvency<br>PO Box 7346<br>Philadelphia, PA 19101-7346               | x               | -                      | 4th Quarter 2012 Payroll Taxes                      |           |                  |      | 0.00               | 0.00   |
| Account No. xxxxx6999  | 1               |                        | 09/2012   |           |                  |      |                    |  |
| Internal Revenue Service<br>Centralized Insolvency<br>PO Box 7346<br>Philadelphia, PA 19101-7346               | x               | -                      | 3rd Quarter 2012 Payroll Taxes                      |           |                  |      |                    | 0.00   |
|  |                 |                        |   |           |                  |      | 12,432.09          | 12,432.09  |
| Account No. xxxxx6999  Internal Revenue Service Centralized Insolvency PO Box 7346 Philadelphia, PA 19101-7346 | x               | _                      | 03/2012<br>1st Quarter 2012 Payroll Taxes           |           |                  |      |                    | 0.00   |
| Account No. xxxxx6999  | +               |                        | 06/2012   | +         | _                | _    | 14,316.57          | 14,316.57  |
| Internal Revenue Service<br>Centralized Insolvency<br>PO Box 7346<br>Philadelphia, PA 19101-7346               | x               | -                      | 2nd Quarter 2012 Payroll Taxes                      |           |                  |      |                    | 0.00   |
| Account No. xxxxx6999  | +               |                        | 12/2011   | +         | $\vdash$         |      | 12,179.31          | 12,179.31  |
| Internal Revenue Service<br>Centralized Insolvency<br>PO Box 7346<br>Philadelphia, PA 19101-7346               | x               | -                      | 4th Quarter 2011 Payroll Taxes                      |           |                  |      | 12,037.35          | 0.00   |
| Sheet 6 of 8 continuation sheets   | attache         | L<br>d to              |   | Sub       | tota             | al   | .2,007.00          | 0.00   |
| Schedule of Creditors Holding Unsecured l  |                 |                        |   | this      | pag              | ge)  | 50,965.32          | 50,965.32  |

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B6E (Official Form 6E) (4/13) - Cont.

| In re | Mary Lynn Mapes |        | Case No. |  |
|-------|-----------------|--------|----------|--|
| -     |                 | Debtor | ,        |  |

### SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

(Continuation Sheet)

**Taxes and Certain Other Debts Owed to Governmental Units** 

TYPE OF PRIORITY CODEBTOR Husband, Wife, Joint, or Community AMOUNT NOT ENTITLED TO PRIORITY, IF ANY CREDITOR'S NAME, NLIQUIDATED ONTINGENT S P U T E D AND MAILING ADDRESS Н DATE CLAIM WAS INCURRED **AMOUNT** INCLUDING ZIP CODE, W AND CONSIDERATION FOR CLAIM OF CLAIM AMOUNT ENTITLED TO PRIORITY AND ACCOUNT NUMBER J С (See instructions.) Account No. xxxxx6999 09/2011 3rd Quarter 2011 Payroll Taxes Internal Revenue Service 0.00 **Centralized Insolvency** PO Box 7346 Χ Philadelphia, PA 19101-7346 18,132.56 18,132.56 Account No. xxxxx6999 06/2011 2nd Quarter 2011 Payroll Taxes Internal Revenue Service 0.00 **Centralized Insolvency** PO Box 7346 Χ Philadelphia, PA 19101-7346 16,346.80 16,346.80 Account No. xxxxx6999 03/2011 1st Quarter 2011 Payroll Taxes **Internal Revenue Service** 0.00 **Centralized Insolvency** PO Box 7346 Χ Philadelphia, PA 19101-7346 13,819.83 13,819.83 Account No. xxxxx6999 03/2012 1st Quarter 2012 Payroll Taxes **Internal Revenue Service** 0.00 **Centralized Insolvency** PO Box 7346 x |-Philadelphia, PA 19101-7346 9,703.46 9,703.46 2013 Account No. Chapter 11 Unpaid Quarterly Fees **United States Trustees Office** 975.00 780 Regent Street Suite 304 X Madison, WI 53715 975.00 0.00 Subtotal 975.00 Sheet 7 of 8 continuation sheets attached to (Total of this page)

Schedule of Creditors Holding Unsecured Priority Claims

58,002.65

58,977.65

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B6E (Official Form 6E) (4/13) - Cont.

| In re | Mary Lynn Mapes | Case No |  |
|-------|-----------------|---------|--|
| -     |                 |         |  |

## SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

(Continuation Sheet)

Taxes and Certain Other Debts Owed to Governmental Units

TYPE OF PRIORITY UNLIQUIDATED CODEBTOR Husband, Wife, Joint, or Community AMOUNT NOT ENTITLED TO PRIORITY, IF ANY CREDITOR'S NAME, ONTINGENT SPUTED AND MAILING ADDRESS Н DATE CLAIM WAS INCURRED **AMOUNT** INCLUDING ZIP CODE, W AND CONSIDERATION FOR CLAIM OF CLAIM AMOUNT ENTITLED TO PRIORITY C AND ACCOUNT NUMBER (See instructions.) Account No. xxxxxxx7412 Sales Tax plus penalty and interest **Wisconsin Department of Revenue** 0.00 PO Box 8901 Madison, WI 53708-8901 Χ 7,482.26 7,482.26 Account No. Account No. Account No. Account No. Subtotal 0.00 Sheet 8 of 8 continuation sheets attached to (Total of this page) Schedule of Creditors Holding Unsecured Priority Claims 7,482.26 7,482.26 Total 975.00 (Report on Summary of Schedules) 188,438.06 187,463.06

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B6F (Official Form 6F) (12/07)

| In re | Mary Lynn Mapes |        | Case No. |
|-------|-----------------|--------|----------|
| -     |                 | Debtor |          |

#### SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

☐ Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F.

|   |                 |                  | 1                                       |           | _                | _              |             |                 |
|---|-----------------|------------------|---|-----------|------------------|----------------|-------------|-----------------|
| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | C O D E B T O R | H<br>W<br>J<br>C | CONSIDERATION FOR CLAIM. IF CLAIM       | CONTINGEN | L Q U            | ]<br>]<br>F    | U<br>T<br>F | AMOUNT OF CLAIM |
| Account No. xxxxxxxxx0542   |                 |                  | Services                                | T N       | A<br>T<br>E<br>D | 1              | Ī           |                 |
| AT&T<br>Bankruptcy Department<br>6021 S. Rio Grande Avenue<br>Orlando, FL 32859                   | x               | -                | Business                                |           | D                |                |             | 184.92          |
| Account No. 311   |                 |                  | Services Business is closed. No current |           | $\vdash$         | t              | 1           |                 |
| Avenue Motor Sales, Inc.<br>1998 W. McKee<br>Batavia, IL 60510                                    | x               | -                | address. Business                       | x         | x                | נ              | x           |                 |
|   |                 |                  |   |           |                  |                |             | 1,384.80        |
| Account No. ECOSTEAM  Badger Tag 83 Bentem Street Random Lake, WI 53075                           | x               | -                | Services Business                       |           |                  |                |             |                 |
|   |                 |                  |   |           |                  |                |             | 700.00          |
| Account No. 4926  Berlands Tools 600 Oak Creek Drive Lombard, IL 60148                            | x               | -                | Services Business                       |           |                  |                |             | 2,600.00        |
|   |                 | _                |   | Sub       | L<br>tota        | <u> </u><br>al | +           | ,               |
| _10_ continuation sheets attached   |                 |                  | (Total of                               |           |                  |                | )           | 4,869.72        |

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| In re | Mary Lynn Mapes |        | Case No |  |
|-------|-----------------|--------|---------|--|
| •     |                 | Debtor |         |  |

|   | С        | Ни          | isband, Wife, Joint, or Community | Tc          | U     | D                     |                 |
|---|----------|-------------|-----------------------------------|-------------|-------|-----------------------|-----------------|
| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)             | ODE BTOR | C<br>H<br>M | DATE CLAIM WAS INCURRED AND       | CONTINGEN   | L Q U | I<br>S<br>P<br>U<br>T | AMOUNT OF CLAIM |
| Account No. xxxxxxxxxxxx2120  |          |             | Credit Card                       | ٦т          | E     |                       |                 |
| Best Buy Credit Services<br>PO Box 790441<br>Saint Louis, MO 63179  |          | -           | Personal                          |             | D     |                       | 611.68          |
| Account No. xxxx-xxxx-5906  | ╁        |             | Credit Card                       | +           |       |                       | 011.00          |
| Bill Me Later<br>PO Box 2394<br>Omaha, NE 68103-2394  |          | -           | Personal                          |             |       |                       |                 |
|   |          |             |                                   |             |       |                       | 595.86          |
| Account No. xxxxxxxx3193  | 1        |             | Credit Card                       |             |       |                       |                 |
| Capital One<br>Bankruptcy Claims Servicer<br>PO Box 30285<br>Salt Lake City, UT 84130-0285                    |          | -           | Personal                          |             |       |                       | 2,585.00        |
| Account No. xxxxxxxx3642  | $^{+}$   |             | Credit Card                       | +           |       |                       |                 |
| CBNA/Sears<br>PO Box 6282<br>Sioux Falls, SD 57117-6282   |          | -           | Personal                          |             |       |                       |                 |
| Account No.   | ╀        |             | Services                          | +           |       |                       | 2,306.00        |
| ComEd<br>3 Lincoln Center<br>Attn: Bkcy Group-Claims Department<br>Oakbrook Terrace, IL 60181                 | x        | -           | Business                          |             |       |                       | 650.00          |
| 61  |          |             |                                   |             |       | <u></u>               | 000.00          |
| Sheet no. <u>1</u> of <u>10</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims |          |             | (Total of                         | Sub<br>this |       |                       | 6,748.54        |

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B6F (Official Form 6F) (12/07) - Cont.

| In re | Mary Lynn Mapes |        | Case No |  |
|-------|-----------------|--------|---------|--|
| •     |                 | Debtor |         |  |

| CDEDITORIO NAME   | С             | Hu          | sband, Wife, Joint, or Community  | C        | U   | D             |                 |
|---|---------------|-------------|---|----------|-----|---------------|-----------------|
| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)           | O D E B T O R | C<br>A<br>H | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | ONTINGEN | LQU | I S P U T E D | AMOUNT OF CLAIM |
| Account No. xx-xxx521-2   |               |             | Services  | Т        | E   |               |                 |
| DeKalb Clinic<br>1850 Gateway Drive<br>Sycamore, IL 60178   | x             | -           | Business  |          | D   |               | 387.00          |
| Account No. xxx046-2  |               |             | Medical   | +        |     |               | 367.00          |
| DeKalb Clinic Chartered<br>1850 Gateway Drive<br>Sycamore, IL 60178-3192                                    |               | -           | Personal  |          |     |               |                 |
| _   |               |             |   |          |     |               | 337.00          |
| Account No. xxxxxxxx5089  Deluxe for Business PO Box 742572 Cincinnati, OH 45274-2573                       | x             | -           | Services Business   |          |     |               | 411.03          |
| Account No. xxxxx7412   |               |             | Services  | +        |     |               |                 |
| Dex One<br>PO Box 660835<br>Dallas, TX 75266-0835   | x             | -           | Business  | x        | x   | x             |                 |
| Account No2400  | _             |             | Services  | +        |     |               | 1,539.05        |
| Exxon Mobil Credit Card Center PO Box 6404  | x             | -           | Business  | x        | x   | x             |                 |
| Sioux Falls, SD 57117-6404  |               |             |   |          |     |               | 9,587.84        |
| Sheet no. <b>2</b> of <b>10</b> sheets attached to Schedu<br>Creditors Holding Unsecured Nonpriority Claims | ule of        |             | (Total o  | Sub      |     |               | 12,261.92       |

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| In re | Mary Lynn Mapes | Case No. | _ |
|-------|-----------------|----------|---|
| -     |                 | Debtor   |   |

| CD DD MODE 12 11 1 12   | С        | Нυ          | sband, Wife, Joint, or Community  | С        | U                | D      |                 |
|---|----------|-------------|---|----------|------------------|--------|-----------------|
| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)             | CODEBTOR | C<br>H<br>H | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | ONTLNGEN | UZL-QU-DA        | SPUTED | AMOUNT OF CLAIM |
| Account No. xx6880  |          |             | Medical   | ٦Ÿ       | D<br>A<br>T<br>E |        |                 |
| Family Dental Care<br>1840 DeKalb Avenue<br>Sycamore, IL 60178-3190   |          | -           | Personal  |          | D                |        |                 |
| Account No2483  |          |             | Credit Card   |          |                  |        | 150.00          |
| Fifth Third Bank<br>Card Center<br>PO Box 740789<br>Cincinnati, OH 45274-0789                                 | x        | -           | Business  | x        | x                | x      |                 |
|   |          |             |   |          |                  |        | 5,512.88        |
| Account No6915  |          |             | Credit Card   |          |                  |        |                 |
| Fifth Third Bank<br>Card Center<br>PO Box 740789<br>Cincinnati, OH 45274-0789                                 | х        | -           | Business  | x        | x                | x      | 2,580.83        |
| Account No6949  |          |             | Credit Card   |          |                  |        | ,               |
| Fifth Third Bank<br>Card Center<br>PO Box 740789<br>Cincinnati, OH 45274-0789                                 | x        | -           | Business  | x        | x                | x      | 21,989.50       |
| Account No. <b>x6586</b>  |          |             | Installment Loan  |          |                  |        | 21,303.00       |
| Fifth Third Bank<br>5050 Kingsley Drive<br>MD# 1MOC2N<br>Cincinnati, OH 45263                                 |          | _           |   |          |                  |        | 19,185.00       |
| Sheet no. <b>3</b> of <b>10</b> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims | 1        | <u> </u>    | [Total o  | Sub      |                  |        | 49,418.21       |

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| In re | Mary Lynn Mapes | Case No. |
|-------|-----------------|----------|
| ,     |                 | Debtor   |

| ODED TO DESCRIPTION OF THE PROPERTY OF THE PRO | С        | Hu     | sband, Wife, Joint, or Community  |            | С         | U           | D |                 |
|--|----------|--------|---|------------|-----------|-------------|---|-----------------|
| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)  | CODEBTOR | J<br>H | DATE CLAIM WAS INCURRED AI<br>CONSIDERATION FOR CLAIM. IF CI<br>IS SUBJECT TO SETOFF, SO STAT | LAIM       | CONTINGEN |             |   | AMOUNT OF CLAIM |
| Account No. xxxx7007   |          |        | Collection on behalf of Office Max  |            | Ť         | T           |   |                 |
| Franks, Gerkin & McKenna, PC<br>19333 E Grant Highway<br>PO Box 5<br>Marengo, IL 60152   | x        | -      | Business  |            |           | D           |   | 2,652.73        |
| Account No. xxxxxxxxxxxx2115   |          |        | Services  |            |           |             |   | ,               |
| Frontier Communication<br>PO Box 20550<br>Rochester, NY 14602-0550   | x        | -      | Business  |            |           |             |   |                 |
|  |          |        |   |            |           |             |   | 209.10          |
| Account No.  |          |        | Loan  |            |           |             |   |                 |
| Gary Tadd<br>1135 Elizabeth Drive<br>DeKalb, IL 60115  | x        | -      | Business  |            |           |             |   |                 |
| Account No. xxxx-xxxx-5522   | ╬        |        | Credit Card   |            |           |             |   | 87,581.17       |
| GECRB/Lowe's<br>Attn: Bankruptcy Department<br>PO Box 103104<br>Roswell, GA 30076  |          | -      | Personal  |            |           |             |   | 5,241.56        |
| Account No. xxx9922  | ╁        |        | Collection on behalf of Kishwaukee  |            |           |             |   | ,               |
| H&R Accounts, Inc.<br>7017 John Deere Parkway<br>PO Box 672<br>Moline, IL 61266-0672   |          | -      | Community Hospital.  Personal   |            |           |             |   | 1 006 00        |
| St. 4 . 6 40 . 1 . 4 . 1 1: St. 11:  |          |        |   |            |           | L           |   | 1,006.00        |
| Sheet no. <u>4</u> of <u>10</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims  | Î        |        | C   | Total of t |           | tota<br>pag |   | 96,690.56       |

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| In re | Mary Lynn Mapes | Case No. | _ |
|-------|-----------------|----------|---|
| -     |                 | Debtor   |   |

| CREDITOR'S NAME, MAILING ADDRESS  | CODE            | н           | sband, Wife, Joint, or Community  DATE CLAIM WAS INCURRED AND     | CONTL                      | UNL      | I I I I I I I I I I I I I I I I I I I | S<br>P           |                 |
|---|-----------------|-------------|---|----------------------------|----------|---------------------------------------|------------------|-----------------|
| INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)  | C O D E B T O R | C<br>J<br>M | CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | I<br>N<br>G<br>E<br>N<br>T | QU I DAT |                                       | U<br>T<br>E<br>D | AMOUNT OF CLAIM |
| Account No. xx0979  | Γ               |             | Services  | Ť                          | E        |                                       | Ī                |                 |
| Hintzsche Oil<br>PO Box 367<br>Maple Park, IL 60151-0367  | x               | -           | Business  |                            |          |                                       |                  | 27,360.86       |
| Account No. xxxxxxxx9544  |                 |             | Services  | $\dagger$                  | t        | T                                     | 7                |                 |
| Idearc Media, LLC<br>PO Box 619810<br>DFW Airport, TX 75261-9810  | x               | -           | Business  | ×                          | x        | ( )                                   | x                |                 |
|   |                 |             |   |                            |          |                                       |                  | 5,000.00        |
| Account No.   | T               |             | Trade Debt  | +                          | T        | Ť                                     | 7                |                 |
| Jerry's Country Cabinet Shop<br>5266 West Pines Road<br>Oregon, IL 61061                                      | x               | -           | Business  |                            |          |                                       |                  |                 |
|   |                 |             |   |                            |          |                                       |                  | 9,446.67        |
| Account No.   | 1               |             | Loan  |                            |          | T                                     | 7                |                 |
| John Chattelier<br>c/o Aspen Chiropractic<br>650 N Peace Road<br>DeKalb, IL 60115                             | x               | -           | Business  |                            |          |                                       |                  |                 |
|   |                 |             |   |                            |          |                                       |                  | 10,000.00       |
| Account No. x7882   | Ī               | T           | Services  | $\top$                     | T        | T                                     | 7                |                 |
| Klein Stoddard Buck Waller & Lewis<br>2045 Aberdeen Court<br>Suite A<br>Sycamore, IL 60178                    | x               | -           | Business  |                            |          |                                       |                  |                 |
|   |                 |             |   | $\perp$                    |          |                                       |                  | 2,825.00        |
| Sheet no. <u>5</u> of <u>10</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims |                 |             | (Total of   | Sub                        |          |                                       | )                | 54,632.53       |

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| In re | Mary Lynn Mapes | Case No. |  |
|-------|-----------------|----------|--|
| _     |                 | Debtor   |  |

|   | I c      | I     | ahard Wife Islant or Oceanousity  | 16         |                       | <u> </u> | T               |
|---|----------|-------|---|------------|-----------------------|----------|-----------------|
| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)               | CODEBTOR | H W J | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | CONTINGENT | DZLLQDLD4             | DISPUTED | AMOUNT OF CLAIM |
| Account No. xxxxxxxx5430  |          |       | Credit Card   | T          | D<br>A<br>T<br>E<br>D |          |                 |
| Kohls<br>P.O. Box 3115<br>Milwaukee, WI 53201   |          | -     | Personal  |            | D                     |          | 1,253.00        |
| Account No. xxxxxxxx1682  | ╀        |       | Services  | +          |                       |          | 1,233.00        |
| McBee Systems, Inc.<br>PO Box 88042<br>Chicago, IL 60680-1042   | x        | -     | Business  | x          | x                     | x        | 542.63          |
| Account No. xxxxx7412   | ╁        |       | Collection on behalf of AT&T Yellow Pages,  |            |                       |          | 0.2.00          |
| McCarthy, Burgess & Wolff<br>The MB&W Building<br>26000 Cannon Road<br>Cleveland, OH 44146                      | x        | -     | formerly Sprint Yellow Pages  | x          | x                     | x        | 2,383.51        |
| Account No. xxxx7001  | l        |       | Services  |            |                       |          |                 |
| Mercedes Benz of Hoffman Estates<br>1000 W. Golf Road<br>Hoffman Estates, IL 60169                              | x        | -     | Business  |            |                       |          | 1,241.29        |
| Account No. <b>x2577</b>  | -        |       | Services  |            |                       |          | 1,= 11120       |
| NexTraq<br>1200 Lake Hearn Drive<br>Suite 500<br>Atlanta, GA 30319  | x        | -     | Business  |            |                       |          |                 |
|   |          |       |   |            |                       |          | 1,321.60        |
| Sheet no. <b>_6</b> of <b>_10</b> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims |          |       | (Total of   | Subt       |                       |          | 6,742.03        |

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B6F (Official Form 6F) (12/07) - Cont.

| In re | Mary Lynn Mapes |        | Case No. |  |
|-------|-----------------|--------|----------|--|
|       |                 | Debtor | ,        |  |

| CREDITOR'S NAME,   | C        | Hu          | sband, Wife, Joint, or Community  |             | U            | D               | ) <u> </u>   |                 |
|--|----------|-------------|---|-------------|--------------|-----------------|--------------|-----------------|
| MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)                                 | CODEBTOR | C<br>A<br>M | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | CONTINGENT  | L I QU I DAT | D I S P U T E D | :            | AMOUNT OF CLAIM |
| Account No.  |          |             | Services  | T           | E            | 1               |              |                 |
| NiCor Gas - Bankruptcy Dept.<br>1844 Ferry Road<br>Naperville, IL 60563  | x        | -           | Business  |             | D            |                 |              | 650.00          |
| Account No. xxxx7007   | t        | T           | Trade Debt  | $\dagger$   | T            | T               | t            |                 |
| Office Max<br>263 Shuman Boulevard<br>Naperville, IL 60563   | x        | -           | Business  |             |              |                 |              |                 |
|  |          |             |   |             |              |                 |              | 2,652.73        |
| Account No. xxxxxxx3384  | T        |             | Services  | T           | T            | T               | Ť            |                 |
| Personnel Concepts<br>3200 E. Guasti Road<br>Ontario, CA 91761   | x        | -           | Business  |             |              |                 |              | 200.00          |
| Account No. x2115  |          |             | Services  | +           | ╄            | Ļ               | $\downarrow$ | 300.00          |
| Petkovsek & Moran LLP<br>4001 Nakoosa Trail<br>Suite 200<br>Madison, WI 53714-1355                               | x        | -           | Business  |             |              |                 |              | 763.00          |
| Account No. xxx6692  |          |             | Equipment Lease   | T           | T            | T               | Ť            |                 |
| Pitney Bowes<br>2225 American Drive<br>Neenah, WI 54956-1005   | x        | -           | Business  |             |              |                 |              | University      |
|  |          |             |   | $\perp$     | $\perp$      | $\perp$         | $\downarrow$ | Unknown         |
| Sheet no <b>7</b> of _ <b>10</b> _ sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims |          |             | (Total of   | Sub<br>this |              |                 | ,            | 4,365.73        |

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B6F (Official Form 6F) (12/07) - Cont.

| In re | Mary Lynn Mapes | Case No |  |
|-------|-----------------|---------|--|
| _     |                 | Debtor  |  |

| CREDITOR'S NAME,  | С        | Hu          | sband, Wife, Joint, or Community  | C           | U           | D             |                 |
|---|----------|-------------|---|-------------|-------------|---------------|-----------------|
| MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)                                  | CODEBTOR | C<br>J<br>H | DATE CLAIM WAS INCURRED AND<br>CONSIDERATION FOR CLAIM. IF CLAIM<br>IS SUBJECT TO SETOFF, SO STATE. | COXFLXGEX   | QUID        | I S P U T E D | AMOUNT OF CLAIN |
| Account No7386  |          |             | Credit Card   | T           | A<br>T<br>E |               |                 |
| Pitney Bowes Purchase Power<br>PO Box 371874<br>Pittsburgh, PA 15250-7874   | х        | _           | Business  |             | D           |               |                 |
| Account No2466  | -        |             | Credit Card   | +           | -           |               | 438.81          |
| Sam's Club<br>Attn: Bankruptcy Dept<br>P.O. Box 103104<br>Roswell, GA 30076                                       | x        | _           | Business  |             |             |               | 1,433.56        |
| Account No.   | ┢        |             | Credit Card   | +           | ╁           | ╁             | 1,433.30        |
| Sears<br>PO Box 182149<br>Columbus, OH 43218-2149   | х        | _           | Business  | x           | x           | x             | 2,400.00        |
| Account No1533  | ╁        |             | Services  | +           |             |               |                 |
| Shell Commercial<br>PO Box 183019<br>Columbus, OH 43218-3019  | x        | _           | Business  | x           | x           | x             |                 |
| Account No. Ecosteam Corp   | -        |             | Services  | +           |             |               | 8,081.67        |
| Sprint<br>P.O. Box 8077<br>London, KY 40742   | x        | -           | Business  | x           | x           | x             |                 |
|   |          |             |   |             |             |               | 4,214.98        |
| Sheet no. <b>_8</b> of <b>_10</b> _ sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims |          |             | (Total of   | Sub<br>this |             |               | 16,569.02       |

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B6F (Official Form 6F) (12/07) - Cont.

| In re | Mary Lynn Mapes |        | Case No. |  |
|-------|-----------------|--------|----------|--|
| •     |                 | Debtor |          |  |

| CREDITOR'S NAME,<br>MAILING ADDRESS   | COD      | Hu<br>H     | sband, Wife, Joint, or Community  | C O N T   | U<br>N<br>L | 1 5          | S            |                 |
|---|----------|-------------|---|-----------|-------------|--------------|--------------|-----------------|
| INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)                            | CODEBTOR | C<br>A<br>M | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | TINGENT   | QUIDAT      | S P UT E D   | =            | AMOUNT OF CLAIM |
| Account No. xxxxxxxx4749  |          |             | Trade Debt  | ٦         | T<br>E<br>D |              | ſ            |                 |
| SuperMedia LLC<br>PO Box 619009<br>Dallas, TX 75261-9009                                    | x        | -           | Business  |           |             |              |              | 565.86          |
| Account No3917  | ✝        |             | Credit Card   | $\dagger$ | +           | t            | †            |                 |
| Target National Bank<br>Target Card Services<br>PO Box 673<br>Minneapolis, MN 55440-0673    |          | -           | Personal  |           |             |              |              |                 |
|   |          |             |   |           |             |              |              | 9,304.98        |
| Account No. Ecosteam  |          |             | Services  | T         |             | T            | T            |                 |
| Universal Fleet<br>PO Box 70997<br>Charlotte, NC 28272-0997                                 | x        | -           | Business  |           |             |              |              | 5,930.20        |
| Account No. xxxxxxx3244   | ╁        | $\vdash$    | Services  | +         | ╁           | +            | +            |                 |
| Verizon Select Services, Inc.<br>PO Box 650457<br>Dallas, TX 75265-0457                     | x        | -           | Business  | x         | x           | ( )          | x            |                 |
|   | ┖        | L           |   | $\perp$   | Ļ           | $\downarrow$ | $\downarrow$ | 10,175.00       |
| Account No. xxxxxxx2449  Verizon Select Services, Inc. PO Box 650457  Dallas, TX 75265-0457 | x        | -           | Services Business   |           |             |              |              | 1,781.35        |
| Sheet no9 of _10_ sheets attached to Schedule of  | _        |             | ı   | Sub       | tota        | al           | †            | 27,757.39       |
| Creditors Holding Unsecured Nonpriority Claims  |          |             | (Total of   | this      | pas         | ge)          | ) [          | 21,131.39       |

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B6F (Official Form 6F) (12/07) - Cont.

| In re | Mary Lynn Mapes | Case No | _ |
|-------|-----------------|---------|---|
| _     |                 | Debtor  |   |

|  |          |             |                                  |             |          |          | _            |                 |
|--|----------|-------------|----------------------------------|-------------|----------|----------|--------------|-----------------|
| CREDITOR'S NAME,   | 000      |             | sband, Wife, Joint, or Community |             | U<br>N   | D        | )            |                 |
| MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)                               | CODEBTOR | C<br>A<br>M |                                  | CONTINGENT  |          | DISPUTED |              | AMOUNT OF CLAIM |
| Account No. x3330  | <u> </u> |             | Trade Debt                       | ٦<br>۲      | E        | Ī        | _            |                 |
| Wm. F. Meyer Co.<br>1855 E. New York Street<br>Aurora, IL 60502  | x        | -           | Business                         |             | D        |          |              | 4,185.41        |
| Account No. xx6241   | t        |             | Services                         | +           | t        |          | $\dagger$    |                 |
| Yellowbook<br>P.O. Box 3162<br>Cedar Rapids, IA 52406  | x        | -           | Business                         |             |          |          |              |                 |
|  |          |             |                                  |             |          |          |              | 26,659.43       |
| Account No.  |          |             |                                  | T           |          |          | 1            |                 |
|  |          |             |                                  |             |          |          |              |                 |
|  |          |             |                                  |             |          |          |              |                 |
|  |          |             |                                  |             |          |          |              |                 |
| Account No.  | T        |             |                                  | $\top$      | t        |          | †            |                 |
|  |          |             |                                  |             |          |          |              |                 |
|  |          |             |                                  |             |          |          |              |                 |
|  |          |             |                                  |             |          |          |              |                 |
| Account No.  | t        |             |                                  | $\dagger$   | t        |          | $\dagger$    |                 |
|  |          |             |                                  |             |          |          |              |                 |
|  |          |             |                                  |             |          |          |              |                 |
|  |          |             |                                  |             |          |          |              |                 |
|  |          |             |                                  |             | <u>L</u> | Ļ        | $\downarrow$ |                 |
| Sheet no. <b>10</b> of <b>10</b> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims |          |             | (Total of                        | Sub<br>this |          |          | )            | 30,844.84       |
|  |          |             |                                  |             | Γot      |          | T            | 0/2 222 /2      |
|  |          |             | (Report on Summary of S          | che         | dul      | es)      | ) [          | 310,900.49      |

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B6G (Official Form 6G) (12/07)

| In re | Mary Lynn Mapes | Case No. |
|-------|-----------------|----------|
| _     |                 | Debtor   |

### SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser", "Agent", etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

■ Check this box if debtor has no executory contracts or unexpired leases.

Name and Mailing Address, Including Zip Code, of Other Parties to Lease or Contract

Description of Contract or Lease and Nature of Debtor's Interest. State whether lease is for nonresidential real property. State contract number of any government contract. Case 15-81721 Doc 1 Filed 06/30/15 Entered 06/30/15 14:38:32 Desc Main Document Page 36 of 72

B6H (Official Form 6H) (12/07)

| In re | Mary Lynn Mapes | Case No |
|-------|-----------------|---------|
| -     |                 | Debtor  |

#### **SCHEDULE H - CODEBTORS**

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

| NAME AND ADDRESS OF CODEBTOR | NAME AND ADDRESS OF CREDITOR |
|------------------------------|------------------------------|
| Arthur Strasser              | Fifth Third Bank             |
| Deceased                     | Card Center                  |
|                              | PO Box 740789                |
|                              | Cincinnati, OH 45274-0789    |
| Arthur Strasser              | Fifth Third Bank             |
| Deceased                     | Card Center                  |
|                              | PO Box 740789                |
|                              | Cincinnati, OH 45274-0789    |
| Arthur Strasser              | Fifth Third Bank             |
| Deceased                     | Card Center                  |
| 2000000                      | PO Box 740789                |
|                              | Cincinnati, OH 45274-0789    |
| Arthur Strasser              | Idearc Media, LLC            |
| Deceased                     | PO Box 619810                |
|                              | DFW Airport, TX 75261-9810   |
| Arthur Strasser              | McCarthy, Burgess & Wolff    |
| Deceased                     | The MB&W Building            |
|                              | 26000 Cannon Road            |
|                              | Cleveland, OH 44146          |
| Arthur Strasser              | Sprint                       |
| Deceased                     | P.O. Box 8077                |
|                              | London, KY 40742             |
| Arthur Strasser              | Avenue Motor Sales, Inc.     |
| Deceased                     | 1998 W. McKee                |
|                              | Batavia, IL 60510            |
| Arthur Strasser              | Dex One                      |
| Deceased                     | PO Box 660835                |
|                              | Dallas, TX 75266-0835        |
| Arthur Strasser              | Sears                        |
| Deceased                     | PO Box 182149                |
|                              | Columbus, OH 43218-2149      |
| Arthur Strasser              | McBee Systems, Inc.          |
| Deceased                     | PO Box 88042                 |
|                              | Chicago, IL 60680-1042       |

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| In re | Mary Lynn Mapes | Case No. |
|-------|-----------------|----------|
|       | y =y            |          |

Debtor

| NAME AND ADDRESS OF CODEBTOR  | NAME AND ADDRESS OF CREDITOR                             |
|-------------------------------|--|
|                               |  |
| Arthur Strasser               | Exxon Mobil  |
| Deceased                      | Credit Card Center                                       |
|                               | PO Box 6404  |
|                               | Sioux Falls, SD 57117-6404                               |
| Arthur Strasser               | Shell Commercial   |
| Deceased                      | PO Box 183019  |
|                               | Columbus, OH 43218-3019                                  |
| Arthur Strasser               | Verizon Select Services, Inc.                            |
| Deceased                      | PO Box 650457  |
|                               | Dallas, TX 75265-0457                                    |
| Ecosteam                      | Rockford Bank & Trust Company                            |
| 920 W. Prairie Drive          | PO Box 1748  |
| Suite M                       | Rockford, IL 61110                                       |
| Sycamore, IL 60178            |  |
| Ecosteam                      | Rockford Bank & Trust Company                            |
| 920 W. Prairie Drive          | PO Box 1748  |
| Suite M                       | Rockford, IL 61110                                       |
| Sycamore, IL 60178            |  |
| Ecosteam                      | IDES   |
| 920 W. Prairie Drive          | Collections Section                                      |
| Suite M                       | 33 S. State Street, 10th Floor                           |
| Sycamore, IL 60178            | Chicago, IL 60603-2802                                   |
| Ecosteam                      | IDES   |
| 920 W. Prairie Drive          | Collections Section                                      |
| Suite M                       | 33 S. State Street, 10th Floor                           |
| Sycamore, IL 60178            | Chicago, IL 60603-2802                                   |
| Ecosteam                      | IDES   |
| 920 W. Prairie Drive          | Collections Section                                      |
| Suite M<br>Sycamore, IL 60178 | 33 S. State Street, 10th Floor<br>Chicago, IL 60603-2802 |
| Sycamore, ic 60176            | Cilicago, IL 00003-2002                                  |
| Ecosteam                      | IDES   |
| 920 W. Prairie Drive          | Collections Section                                      |
| Suite M                       | 33 S. State Street, 10th Floor<br>Chicago, IL 60603-2802 |
| Sycamore, IL 60178            | Cilicago, IL 60603-2602                                  |
| Ecosteam                      | IDES   |
| 920 W. Prairie Drive          | Collections Section                                      |
| Suite M<br>Sycamore, IL 60178 | 33 S. State Street, 10th Floor                           |
| Sycamore, in 00170            | Chicago, IL 60603-2802                                   |
| Ecosteam                      | IDES   |
| 920 W. Prairie Drive          | Collections Section                                      |
| Suite M<br>Sycamore, IL 60178 | 33 S. State Street, 10th Floor<br>Chicago, IL 60603-2802 |
| Sycamore, IL 00170            | Gilicayo, il 00003-2002                                  |

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| In re  | Mary Lynn Mapes | Case No.  |
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Debtor

# SCHEDULE H - CODEBTORS (Continuation Sheet)

| NAME AND ADDRESS OF CODEBTOR | NAME AND ADDRESS OF CREDITOR   |
|------------------------------|--------------------------------|
| Ecosteam                     | IDES                           |
| 920 W. Prairie Drive         | Collections Section            |
| Suite M                      | 33 S. State Street, 10th Floor |
| Sycamore, IL 60178           | Chicago, IL 60603-2802         |
| Ecosteam                     | IDES                           |
| 920 W. Prairie Drive         | Collections Section            |
| Suite M                      | 33 S. State Street, 10th Floor |
| Sycamore, IL 60178           | Chicago, IL 60603-2802         |
| Ecosteam                     | IDES                           |
| 920 W. Prairie Drive         | Collections Section            |
| Suite M                      | 33 S. State Street, 10th Floor |
| Sycamore, IL 60178           | Chicago, IL 60603-2802         |
| Ecosteam                     | IDES                           |
| 920 W. Prairie Drive         | Collections Section            |
| Suite M                      | 33 S. State Street, 10th Floor |
| Sycamore, IL 60178           | Chicago, IL 60603-2802         |
| Ecosteam                     | IDES                           |
| 920 W. Prairie Drive         | Collections Section            |
| Suite M                      | 33 S. State Street, 10th Floor |
| Sycamore, IL 60178           | Chicago, IL 60603-2802         |
| Ecosteam                     | Illinois Department of Revenue |
| 920 W. Prairie Drive         | Bankruptcy Section             |
| Suite M                      | PO Box 64338                   |
| Sycamore, IL 60178           | Chicago, IL 60664-0338         |
| Ecosteam                     | Illinois Department of Revenue |
| 920 W. Prairie Drive         | Bankruptcy Section             |
| Suite M                      | PO Box 64338                   |
| Sycamore, IL 60178           | Chicago, IL 60664-0338         |
| Ecosteam                     | Illinois Department of Revenue |
| 920 W. Prairie Drive         | Bankruptcy Section             |
| Suite M                      | PO Box 64338                   |
| Sycamore, IL 60178           | Chicago, IL 60664-0338         |
| Ecosteam                     | Illinois Department of Revenue |
| 920 W. Prairie Drive         | Bankruptcy Section             |
| Suite M                      | PO Box 64338                   |
| Sycamore, IL 60178           | Chicago, IL 60664-0338         |
| Ecosteam                     | Illinois Department of Revenue |
| 920 W. Prairie Drive         | Bankruptcy Section             |
| Suite M                      | PO Box 64338                   |

Chicago, IL 60664-0338

Sycamore, IL 60178

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| In re  | Mary Lynn Mapes     | Case No.  |
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Debtor

| NAME AND ADDRESS OF CODEBTOR | NAME AND ADDRESS OF CREDITOR   |
|------------------------------|--------------------------------|
| Ecosteam                     | Illinois Department of Revenue |
| 920 W. Prairie Drive         | Bankruptcy Section             |
| Suite M                      | PO Box 64338                   |
| Sycamore, IL 60178           | Chicago, IL 60664-0338         |
| Ecosteam                     | Illinois Department of Revenue |
| 920 W. Prairie Drive         | Bankruptcy Section             |
| Suite M                      | PO Box 64338                   |
| Sycamore, IL 60178           | Chicago, IL 60664-0338         |
| Ecosteam                     | Illinois Department of Revenue |
| 920 W. Prairie Drive         | Bankruptcy Section             |
| Suite M                      | PO Box 64338                   |
| Sycamore, IL 60178           | Chicago, IL 60664-0338         |
| Ecosteam                     | Illinois Department of Revenue |
| 920 W. Prairie Drive         | Bankruptcy Section             |
| Suite M                      | PO Box 64338                   |
| Sycamore, IL 60178           | Chicago, IL 60664-0338         |
| Ecosteam                     | Illinois Department of Revenue |
| 920 W. Prairie Drive         | Bankruptcy Section             |
| Suite M                      | PO Box 64338                   |
| Sycamore, IL 60178           | Chicago, IL 60664-0338         |
| Ecosteam                     | Illinois Department of Revenue |
| 920 W. Prairie Drive         | Bankruptcy Section             |
| Suite M                      | PO Box 64338                   |
| Sycamore, IL 60178           | Chicago, IL 60664-0338         |
| Ecosteam                     | Internal Revenue Service       |
| 920 W. Prairie Drive         | Centralized Insolvency         |
| Suite M                      | PO Box 7346                    |
| Sycamore, IL 60178           | Philadelphia, PA 19101-7346    |
| Ecosteam                     | Internal Revenue Service       |
| 920 W. Prairie Drive         | Centralized Insolvency         |
| Suite M                      | PO Box 7346                    |
| Sycamore, IL 60178           | Philadelphia, PA 19101-7346    |
| Ecosteam                     | Internal Revenue Service       |
| 920 W. Prairie Drive         | Centralized Insolvency         |
| Suite M                      | PO Box 7346                    |
| Sycamore, IL 60178           | Philadelphia, PA 19101-7346    |
| Ecosteam                     | Internal Revenue Service       |
| 920 W. Prairie Drive         | Centralized Insolvency         |
| Suite M                      | PO Box 7346                    |
| Sycamore, IL 60178           | Philadelphia, PA 19101-7346    |

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| In re | Mary Lynn Mapes | Case No. |
|-------|-----------------|----------|
|       |                 |          |

Debtor

# SCHEDULE H - CODEBTORS (Continuation Sheet)

| NAME AND ADDRESS OF CODEBTOR | NAME AND ADDRESS OF CREDITOR    |
|------------------------------|---------------------------------|
| Ecosteam                     | Internal Revenue Service        |
| 920 W. Prairie Drive         | Centralized Insolvency          |
| Suite M                      | PO Box 7346                     |
| Sycamore, IL 60178           | Philadelphia, PA 19101-7346     |
| Ecosteam                     | Internal Revenue Service        |
| 920 W. Prairie Drive         | Centralized Insolvency          |
| Suite M                      | PO Box 7346                     |
| Sycamore, IL 60178           | Philadelphia, PA 19101-7346     |
| Ecosteam                     | Internal Revenue Service        |
| 920 W. Prairie Drive         | Centralized Insolvency          |
| Suite M                      | PO Box 7346                     |
| Sycamore, IL 60178           | Philadelphia, PA 19101-7346     |
| Ecosteam                     | Internal Revenue Service        |
| 920 W. Prairie Drive         | Centralized Insolvency          |
| Suite M                      | PO Box 7346                     |
| Sycamore, IL 60178           | Philadelphia, PA 19101-7346     |
| Ecosteam                     | Internal Revenue Service        |
| 920 W. Prairie Drive         | Centralized Insolvency          |
| Suite M                      | PO Box 7346                     |
| Sycamore, IL 60178           | Philadelphia, PA 19101-7346     |
| Ecosteam                     | Internal Revenue Service        |
| 920 W. Prairie Drive         | Centralized Insolvency          |
| Suite M                      | PO Box 7346                     |
| Sycamore, IL 60178           | Philadelphia, PA 19101-7346     |
| Ecosteam                     | Internal Revenue Service        |
| 920 W. Prairie Drive         | Centralized Insolvency          |
| Suite M                      | PO Box 7346                     |
| Sycamore, IL 60178           | Philadelphia, PA 19101-7346     |
| Ecosteam                     | Internal Revenue Service        |
| 920 W. Prairie Drive         | Centralized Insolvency          |
| Suite M                      | PO Box 7346                     |
| Sycamore, IL 60178           | Philadelphia, PA 19101-7346     |
| Ecosteam                     | United States Trustees Office   |
| 920 W. Prairie Drive         | 780 Regent Street               |
| Suite M                      | Suite 304                       |
| Sycamore, IL 60178           | Madison, WI 53715               |
| Ecosteam                     | Wisconsin Department of Revenue |
| 920 W. Prairie Drive         | PO Box 8901                     |
| Suite M                      | Madison. WI 53708-8901          |

Sycamore, IL 60178

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| In re | Mary Lynn Mapes | Case No. |
|-------|-----------------|----------|
|       |                 |          |

Debtor

| NAME AND ADDRESS OF CODEBTOR                                      | NAME AND ADDRESS OF CREDITOR  |
|---|---|
| Ecosteam<br>920 W. Prairie Drive<br>Suite M<br>Sycamore, IL 60178 | AT&T<br>Bankruptcy Department<br>6021 S. Rio Grande Avenue<br>Orlando, FL 32859               |
| Ecosteam<br>920 W. Prairie Drive<br>Suite M<br>Sycamore, IL 60178 | Avenue Motor Sales, Inc.<br>1998 W. McKee<br>Batavia, IL 60510                                |
| Ecosteam<br>920 W. Prairie Drive<br>Suite M<br>Sycamore, IL 60178 | Badger Tag<br>83 Bentem Street<br>Random Lake, WI 53075                                       |
| Ecosteam<br>920 W. Prairie Drive<br>Suite M<br>Sycamore, IL 60178 | Berlands Tools<br>600 Oak Creek Drive<br>Lombard, IL 60148                                    |
| Ecosteam<br>920 W. Prairie Drive<br>Suite M<br>Sycamore, IL 60178 | ComEd<br>3 Lincoln Center<br>Attn: Bkcy Group-Claims Department<br>Oakbrook Terrace, IL 60181 |
| Ecosteam<br>920 W. Prairie Drive<br>Suite M<br>Sycamore, IL 60178 | DeKalb Clinic<br>1850 Gateway Drive<br>Sycamore, IL 60178                                     |
| Ecosteam<br>920 W. Prairie Drive<br>Suite M<br>Sycamore, IL 60178 | Deluxe for Business<br>PO Box 742572<br>Cincinnati, OH 45274-2573                             |
| Ecosteam<br>920 W. Prairie Drive<br>Suite M<br>Sycamore, IL 60178 | Dex One<br>PO Box 660835<br>Dallas, TX 75266-0835   |
| Ecosteam<br>920 W. Prairie Drive<br>Suite M<br>Sycamore, IL 60178 | Exxon Mobil<br>Credit Card Center<br>PO Box 6404<br>Sioux Falls, SD 57117-6404                |
| Ecosteam<br>920 W. Prairie Drive<br>Suite M<br>Sycamore, IL 60178 | Fifth Third Bank<br>Card Center<br>PO Box 740789<br>Cincinnati, OH 45274-0789                 |

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| In re  | Mary Lynn Mapes     | Case No.  |
|--------|---------------------|-----------|
| 111 10 | mary = y····· mapoo | Cuse 110. |

Debtor

| NAME AND ADDRESS OF CODEBTOR  | NAME AND ADDRESS OF CREDITOR       |
|-------------------------------|------------------------------------|
| Ecosteam                      | Fifth Third Bank                   |
| 920 W. Prairie Drive          | Card Center                        |
| Suite M                       | PO Box 740789                      |
| Sycamore, IL 60178            | Cincinnati, OH 45274-0789          |
| Ecosteam                      | Fifth Third Bank                   |
| 920 W. Prairie Drive          | Card Center                        |
| Suite M                       | PO Box 740789                      |
| Sycamore, IL 60178            | Cincinnati, OH 45274-0789          |
| Ecosteam                      | Franks, Gerkin & McKenna, PC       |
| 920 W. Prairie Drive          | 19333 E Grant Highway              |
| Suite M                       | PO Box 5                           |
| Sycamore, IL 60178            | Marengo, IL 60152                  |
| Ecosteam                      | Frontier Communication             |
| 920 W. Prairie Drive          | PO Box 20550                       |
| Suite M                       | Rochester, NY 14602-0550           |
| Sycamore, IL 60178            |                                    |
| Ecosteam                      | Gary Tadd                          |
| 920 W. Prairie Drive          | 1135 Elizabeth Drive               |
| Suite M                       | DeKalb, IL 60115                   |
| Sycamore, IL 60178            |                                    |
| Ecosteam                      | Hintzsche Oil                      |
| 920 W. Prairie Drive          | PO Box 367                         |
| Suite M                       | Maple Park, IL 60151-0367          |
| Sycamore, IL 60178            |                                    |
| Ecosteam                      | Idearc Media, LLC                  |
| 920 W. Prairie Drive          | PO Box 619810                      |
| Suite M                       | DFW Airport, TX 75261-9810         |
| Sycamore, IL 60178            |                                    |
| Ecosteam                      | Jerry's Country Cabinet Shop       |
| 920 W. Prairie Drive          | 5266 West Pines Road               |
| Suite M                       | Oregon, IL 61061                   |
| Sycamore, IL 60178            |                                    |
| Ecosteam                      | John Chattelier                    |
| 920 W. Prairie Drive          | c/o Aspen Chiropractic             |
| Suite M                       | 650 N Peace Road                   |
| Sycamore, IL 60178            | DeKalb, IL 60115                   |
| Ecosteam                      | Klein Stoddard Buck Waller & Lewis |
| 920 W. Prairie Drive          | 2045 Aberdeen Court                |
| Suite M<br>Sycamore, IL 60178 | Suite A<br>Sycamore, IL 60178      |

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| In re  | Mary Lynn Mapes     | Case No.  |
|--------|---------------------|-----------|
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Debtor

| NAME AND ADDRESS OF CODEBTOR | NAME AND ADDRESS OF CREDITOR     |
|------------------------------|----------------------------------|
| Ecosteam                     | McBee Systems, Inc.              |
| 920 W. Prairie Drive         | PO Box 88042                     |
| Suite M                      | Chicago, IL 60680-1042           |
| Sycamore, IL 60178           |                                  |
| Ecosteam                     | Mercedes Benz of Hoffman Estates |
| 920 W. Prairie Drive         | 1000 W. Golf Road                |
| Suite M                      | Hoffman Estates, IL 60169        |
| Sycamore, IL 60178           |                                  |
| Ecosteam                     | NexTraq                          |
| 920 W. Prairie Drive         | 1200 Lake Hearn Drive            |
| Suite M                      | Suite 500                        |
| Sycamore, IL 60178           | Atlanta, GA 30319                |
| Ecosteam                     | NiCor Gas - Bankruptcy Dept.     |
| 920 W. Prairie Drive         | 1844 Ferry Road                  |
| Suite M                      | Naperville, IL 60563             |
| Sycamore, IL 60178           |                                  |
| Ecosteam                     | Office Max                       |
| 920 W. Prairie Drive         | 263 Shuman Boulevard             |
| Suite M                      | Naperville, IL 60563             |
| Sycamore, IL 60178           |                                  |
| Ecosteam                     | Personnel Concepts               |
| 920 W. Prairie Drive         | 3200 E. Guasti Road              |
| Suite M                      | Ontario, CA 91761                |
| Sycamore, IL 60178           |                                  |
| Ecosteam                     | Petkovsek & Moran LLP            |
| 920 W. Prairie Drive         | 4001 Nakoosa Trail               |
| Suite M                      | Suite 200                        |
| Sycamore, IL 60178           | Madison, WI 53714-1355           |
| Ecosteam                     | Pitney Bowes                     |
| 920 W. Prairie Drive         | 2225 American Drive              |
| Suite M                      | Neenah, WI 54956-1005            |
| Sycamore, IL 60178           |                                  |
| Ecosteam                     | Pitney Bowes Purchase Power      |
| 920 W. Prairie Drive         | PO Box 371874                    |
| Suite M                      | Pittsburgh, PA 15250-7874        |
| Sycamore, IL 60178           |                                  |
| Ecosteam                     | Sam's Club                       |
| 920 W. Prairie Drive         | Attn: Bankruptcy Dept            |
| Suite M                      | P.O. Box 103104                  |
| Sycamore, IL 60178           | Roswell, GA 30076                |

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| In re  | Mary Lynn Mapes     | Case No.  |
|--------|---------------------|-----------|
| 111 10 | mary = y····· mapoo | Cuse 110. |

Debtor

| NAME AND ADDRESS OF CODEBTOR     | NAME AND ADDRESS OF CREDITOR           |
|----------------------------------|--|
| Ecosteam                         | Sears                                  |
| 920 W. Prairie Drive             | PO Box 182149                          |
| Suite M                          | Columbus, OH 43218-2149                |
| Sycamore, IL 60178               | Goldmans, 611 10210 2110               |
| Ecosteam                         | Shell Commercial                       |
| 920 W. Prairie Drive             | PO Box 183019                          |
| Suite M                          | Columbus, OH 43218-3019                |
| Sycamore, IL 60178               |  |
| Ecosteam                         | Sprint                                 |
| 920 W. Prairie Drive             | P.O. Box 8077                          |
| Suite M<br>Sycamore, IL 60178    | London, KY 40742                       |
|                                  |  |
| Ecosteam<br>920 W. Prairie Drive | SuperMedia LLC<br>PO Box 619009        |
| Suite M                          | Dallas, TX 75261-9009                  |
| Sycamore, IL 60178               | Dallas, 17 13201-3003                  |
| Ecosteam                         | Universal Fleet                        |
| 920 W. Prairie Drive             | PO Box 70997                           |
| Suite M                          | Charlotte, NC 28272-0997               |
| Sycamore, IL 60178               | ·                                      |
| Ecosteam                         | Verizon Select Services, Inc.          |
| 920 W. Prairie Drive             | PO Box 650457                          |
| Suite M                          | Dallas, TX 75265-0457                  |
| Sycamore, IL 60178               |  |
| Ecosteam                         | Verizon Select Services, Inc.          |
| 920 W. Prairie Drive             | PO Box 650457                          |
| Suite M<br>Sycamore, IL 60178    | Dallas, TX 75265-0457                  |
| Sycamore, IL 00176               |  |
| Ecosteam                         | Wm. F. Meyer Co.                       |
| 920 W. Prairie Drive             | 1855 E. New York Street                |
| Suite M                          | Aurora, IL 60502                       |
| Sycamore, IL 60178               |  |
| Ecosteam                         | Yellowbook                             |
| 920 W. Prairie Drive             | P.O. Box 3162                          |
| Suite M<br>Sycamore, IL 60178    | Cedar Rapids, IA 52406                 |
| Sycamore, IL 00170               |  |
| Ecosteam<br>920 W. Prairie Drive | McCarthy, Burgess & Wolff              |
| Suite M                          | The MB&W Building<br>26000 Cannon Road |
| Sycamore, IL 60178               | Cleveland, OH 44146                    |
| •                                |  |
| John Mapes                       | Rockford Bank & Trust Company          |
| 1237 Mason Street                | PO Box 1748                            |
| DeKalb, IL 60115                 | Rockford, IL 61110                     |

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| In re | Mary Lynn Mapes                                     | Case No.   |  |  |  |  |  |  |  |
|-------|---|--|--|--|--|--|--|--|--|
|       |   | Debtor   |  |  |  |  |  |  |  |
|       | SCHEDULE H - CODEBTORS (Continuation Sheet)         |  |  |  |  |  |  |  |  |
|       | NAME AND ADDRESS OF CODEBTOR                        | NAME AND ADDRESS OF CREDITOR                                       |  |  |  |  |  |  |  |
|       | John Mapes<br>1237 Mason Street<br>DeKalb, IL 60115 | Rockford Bank & Trust Company<br>PO Box 1748<br>Rockford, IL 61110 |  |  |  |  |  |  |  |

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| Fill               | in this information to   | identify your ca                             | ase:   |  |                               |                  |                                       |                                 |                     |                 |
|--------------------|--|--|--|--|-------------------------------|------------------|---------------------------------------|---------------------------------|---------------------|-----------------|
| Deb                | otor 1   | Mary Lynn M                                  | apes   |  |                               | _                |                                       |                                 |                     |                 |
|                    | otor 2<br>use, if filing)  |  |  |  |                               | _                |                                       |                                 |                     |                 |
| Uni                | ted States Bankrupto   | y Court for the                              | NORTHERN DISTRIC   | T OF ILLINOIS                                  |                               |                  |                                       |                                 |                     |                 |
|                    | se number<br>nown)   |  |  |  |                               |                  | Check if this is  An amend  A supplem |                                 | st-petition         | chapter         |
|                    | fficial Form I   |  |  |  |                               |                  | 13 income                             | as of the follow                | ving date:          |                 |
|                    | chedule I: Y   |  | ome<br>ible. If two married peo  |  |                               |                  |                                       |                                 |                     | 12/13           |
| sup<br>spo<br>atta | plying correct informuse. If you are sepach a separate sheet  t 1: Describe                        | mation. If you rated and you to this form. ( | are married and not filir<br>r spouse is not filing wi<br>On the top of any addition | ng jointly, and your s<br>th you, do not inclu | spouse<br>de infor            | is livi<br>matic | ing with you, inc<br>on about your sp | lude informati<br>ouse. If more | on about space is r | your<br>needed, |
| 1.                 | Fill in your employ information.   | yment  |  | Debtor 1                                       |                               |                  | Debtor                                | 2 or non-filing                 | spouse              |                 |
|                    | If you have more than one job, attach a separate page with information about additional employers. |  | Employment status*   | ☐ Employed                                     |                               |                  | ·                                     | ■ Employed                      |                     |                 |
|                    |  |  | ■ Not employed  Occupation   |  | ☐ Not employed  CEO/President |                  |                                       |                                 |                     |                 |
|                    | Include part-time, s   |  | Employer's name  |  |                               |                  |                                       | invironmenta                    | al Group.           | Inc             |
|                    | self-employed work   |  | Employer's address   |  |                               |                  |                                       |                                 | ai Oi Oup,          |                 |
|                    | Occupation may incorrect or homemaker, if it   |  | Employer 3 address   |  |                               |                  |                                       | Prairie Drive,<br>ore, IL 60178 |                     |                 |
|                    |  |  | How long employed th   | nere?  |                               |                  |                                       | 2 years                         |                     |                 |
|                    |  |  |  | *See Atta                                      | chment                        | for A            | dditional Emplo                       | yment Informa                   | ition               |                 |
| Par                | t 2: Give Deta   | ils About Mon                                | thly Income  |  |                               |                  |                                       |                                 |                     |                 |
|                    | mate monthly inconuse unless you are se  |  | ate you file this form. If y   | you have nothing to re                         | eport for                     | any I            | ine, write \$0 in th                  | e space. Includ                 | e your nor          | n-filing        |
|                    | u or your non-filing sp<br>e space, attach a sep   |  | re than one employer, co   | embine the information                         | n for all e                   | emplo            | oyers for that pers                   | on on the lines                 | below. If y         | ou need         |
|                    |  |  |  |  |                               |                  | For Debtor 1                          | For Debtor non-filing s         |                     |                 |
| 2.                 |  |  | y, and commissions (be<br>calculate what the monthl                                  |  | 2.                            | \$_              | 0.00                                  | \$                              | 0.00                |                 |
| 3.                 | Estimate and list i  | monthly overti                               | me pay.  |  | 3.                            | +\$_             | 0.00                                  | +\$                             | 0.00                |                 |
| 4.                 | Calculate gross In   | come. Add lin                                | e 2 + line 3.  |  | 4.                            | \$_              | 0.00                                  | \$                              | 0.00                |                 |
|                    |  |  |  |  |                               | _                |                                       |                                 | -                   |                 |

| Debt | tor 1  | Mary Lynn Mapes  |  |   | Case                         | number (if known)  |                                     |  |  |
|------|--|--|--|---|------------------------------|--|-------------------------------------|--|--|
|      | Сор  | y line 4 here  |  | 4.  | For                          | Debtor 1   |                                     | or Debtor 2 or<br>on-filing spouse<br>0.00   |  |
| 5.   | List   | all payroll deductions:  |  |   |                              |  |                                     |  |  |
|      | 5a.<br>5b.<br>5c.<br>5d.<br>5e.<br>5f.<br>5g.<br>5h. | Tax, Medicare, and Social Secur<br>Mandatory contributions for retively Voluntary contributions for retirely Required repayments of retirem Insurance<br>Domestic support obligations Union dues<br>Other deductions. Specify: | rement plans<br>ement plans  | 5a.<br>5b.<br>5c.<br>5d.<br>5e.<br>5f.<br>5g. | \$\$<br>\$\$<br>\$\$<br>\$\$ | 0.00<br>0.00<br>0.00<br>0.00<br>0.00<br>0.00<br>0.00                 | \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ | 0.00<br>0.00<br>0.00<br>0.00<br>0.00<br>0.00 | )<br>)<br>)<br>)                             |
| 6.   | Add  | the payroll deductions. Add lines  | 5a+5b+5c+5d+5e+5f+5g+5h.   | 6.  | \$                           | 0.00   | \$                                  | 0.00   | )  |
| 7.   | Cald   | culate total monthly take-home pay   | . Subtract line 6 from line 4.   | 7.  | \$                           | 0.00   | \$                                  | 0.00   | <u>)                                    </u> |
| 8.   | 8b. 8c. 8d. 8e. 8f. 8g. 8h.                          | regularly receive Include alimony, spousal support, settlement, and property settlement Unemployment compensation Social Security Other government assistance the Include cash assistance and the v                            | and from operating a business, rty and business showing gross usiness expenses, and the total  ou, a non-filing spouse, or a dependent child support, maintenance, divorce tt.  at you regularly receive alue (if known) of any non-cash assistance rips (benefits under the Supplemental rousing subsidies. behalf of son  Contribution from uncle (monthly | 8c.<br>8d.<br>8e.                             | \$<br>\$<br>\$<br>\$         | 0.00<br>0.00<br>0.00<br>0.00<br>0.00<br>1,292.00<br>0.00<br>2,025.00 | \$<br>\$<br>\$<br>\$<br>+           | 0.00<br>0.00<br>0.00<br>0.00<br>0.00<br>0.00 |  |
| 9.   | Add  | all other income. Add lines 8a+8b  | +8c+8d+8e+8f+8g+8h.  | 9.  | \$                           | 3,317.00   | \$                                  | 540.0  | 00   |
| 10.  |  | culate monthly income. Add line 7 the entries in line 10 for Debtor 1 and  |  | 10. \$  | ;                            | 3,317.00 +   |                                     | 540.00 = \$                                  | 3,857.00                                     |
| 11.  | Inclu<br>othe  | ude contributions from an unmarried<br>r friends or relatives.<br>not include any amounts already inclu  | the expenses that you list in Schedule partner, members of your household, your uded in lines 2-10 or amounts that are not   | deper   |                              | •  | ·                                   |  | 0.00   |
| 12.  |  | e that amount on the Summary of So   | line 10 to the amount in line 11. The res<br>chedules and Statistical Summary of Certa   |   |                              |  |                                     | 12. \$<br><b>Comb</b> i                      |  |
| 13.  | Do y   | you expect an increase or decreas No. Yes. Explain:  | e within the year after you file this form   | ?   |                              |  |                                     | month  | ly income                                    |

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| Debtor 1 Mary Lynn Mapes Case number (if known) |  |
|---|--|
|---|--|

# Official Form B 6I Attachment for Additional Employment Information

| Spouse              |                        |  |
|---------------------|------------------------|--|
| Occupation          | Consultant             |  |
| Name of Employer    | Providence Inc         |  |
| How long employed   |                        |  |
| Address of Employer | 920 W Prairie, Suite M |  |
| , ,                 | Sycamore, IL 60178     |  |

Official Form B 6I Schedule I: Your Income page 3

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| In re | Mary Lynn Mapes | Case No. |  |
|-------|-----------------|----------|--|
|       |                 |          |  |

Debtor(s)

# SCHEDULE I - CURRENT INCOME OF INDIVIDUAL DEBTOR(S) Attachment A

# **Average Monthly Business Income**

|          | Terra Environmental Group | <u>Providence</u> |
|----------|---------------------------|-------------------|
| January  | \$18,225.45               | \$6,510.40        |
| February | \$14,630.30               | \$5,299.00        |
| March    | \$23,476.61               | \$3,737.50        |
| April    | \$26,106.58               | \$0               |
| May      | \$24,111.07               | \$5,653.62        |
| Total    | \$106,550.01              | \$21,200.52       |
| Average  | \$21,310.00               | \$4,240.10        |

**Total Combined Income** \$25,550

# **Average Monthly Business Expenses**

|          | Terra Environmental Group | <b>Providence</b> |
|----------|---------------------------|-------------------|
| January  | \$22,879.58               | \$9,194.42        |
| February | \$12,565.30               | \$5,051.97        |
| March    | \$22,248.06               | \$5,723.95        |
| April    | \$18,487.17               | \$3,137.98        |
| May      | \$20,708.77               | \$5,050.86        |
|          |                           |                   |
| Total    | \$96,888.88               | \$28,159.18       |
| Average  | \$19,377.78               | \$5,631.84        |

**Total Combined Expenses \$25,010** 

**Total Combined Income** \$25,550

**Total Combined Expenses \$25,010** 

Net \$540

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| Fill in this inform               | nation to identify your case:  |  |   |     |  |  |
|-----------------------------------|--|--|---|-----|--|--|
| Debtor 1                          | Mary Lynn Mapes  |  |   | Ch  | eck if this is:                            |  |
|                                   |  |  | _                                       |     | An amended filing                          |  |
| Debtor 2<br>(Spouse, if filing)   |  |  |   |     |  | wing post-petition chapter the following date: |
| (Spouse, it filling)              |  |  |   |     | 13 expenses as or                          | the following date.                            |
| United States Ban                 | kruptcy Court for the: NORTH   | IERN DISTRICT OF ILLIN                       | OIS                                     |     | MM / DD / YYYY                             |  |
| Case number(If known)             |  |  |   |     | A separate filing fo<br>2 maintains a sepa | or Debtor 2 because Debto<br>arate household   |
| Official F                        | orm B 6J   |  |   |     |  |  |
|                                   |  | 1000   |   |     |  | 40/4   |
|                                   | e J: Your Exper  |  |   |     |  | 12/1   |
| information. If<br>number (if kno | e and accurate as possible<br>more space is needed, atta<br>wn). Answer every questio    | ach another sheet to this                    |   |     |  |  |
| Part 1: Des                       | cribe Your Household<br>int case?  |  |   |     |  |  |
| ■ No. Go                          | to line 2.<br>Des Debtor 2 live in a separ   | rate household?                              |   |     |  |  |
|                                   | •  |  |   |     |  |  |
|                                   | Yes. Debtor 2 must file a se   | parate Schedule J.                           |   |     |  |  |
| 2. Do you ha                      | ve dependents? ☐ No  |  |   |     |  |  |
| Do not list and Debto             | = Yes.   | Fill out this information for each dependent | Dependent's relation Debtor 1 or Debtor |     | Dependent's age                            | Does dependent live with you?                  |
| Do not stat<br>dependent          |  |  | Son                                     |     | 16   | □ No<br>■ Yes                                  |
|                                   |  |  | Daughter                                |     | 18   | □ No<br>■ Yes                                  |
|                                   |  |  | Uncle                                   |     | 71   | □ No<br>■ Ya a                                 |
|                                   |  |  | Officie                                 |     |  | ■ Yes<br>□ No                                  |
|                                   |  |  |   |     |  | ☐ Yes  |
| expenses                          | of people other than   | No<br>Yes                                    |   |     |  | _ 166  |
| Estimate your                     | mate Your Ongoing Month<br>expenses as of your bankr<br>a date after the bankrupto<br>e. | uptcy filing date unless y                   |   |     |  |  |
|                                   | ses paid for with non-cash<br>ch assistance and have in                                  |  |   |     | Your exp                                   | enses  |
| •                                 | •  |  |   |     |  |  |
|                                   | or home ownership exper<br>and any rent for the ground of                                |  | nclude first mortgage                   | 4.  | \$   | 2,329.00                                       |
| If not inclu                      | ıded in line 4:  |  |   |     |  |  |
| 4a. Rea                           | estate taxes   |  |   | 4a. | \$   | 0.00   |
|                                   | erty, homeowner's, or renter   | r's insurance                                |   | 4b. | · · -                                      | 0.00   |
|                                   | e maintenance, repair, and   |  |   | 4c. | \$   | 0.00   |
|                                   | eowner's association or con  |  |   | 4d. |  | 0.00   |
| <ol><li>Additional</li></ol>      | mortgage payments for ye   | <b>our residence,</b> such as ho             | me equity loans                         | 5.  | \$   | 0.00   |

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| Debtor 1 Mary Ly                        | nn Mapes   | Case num | ber (if known) |                       |
|---|--|----------|----------------|-----------------------|
| 6. Utilities:                           |  |          |                |                       |
|   | , heat, natural gas  | 6a.      | \$             | 250.00                |
|   | wer, garbage collection  | 6b.      | · -            | 125.00                |
|   | e, cell phone, Internet, satellite, and cable services   | 6c.      |                | 235.00                |
| 6d. Other. Sp                           | · · · · · · · · · · · · · · · · · · ·  | 6d.      | · -            | 0.00                  |
|   | ekeeping supplies  | 7.       |                | 650.00                |
|   | children's education costs   | 7.<br>8. | \$             | 0.00                  |
|   | lry, and dry cleaning  | 9.       | \$             | 150.00                |
| _                                       | products and services  | 10.      | ·              | 100.00                |
|   |  | 11.      |                |                       |
|   | •  | 11.      | Φ              | 150.00                |
| Do not include of                       | Include gas, maintenance, bus or train fare.   | 12.      | \$             | 300.00                |
|   | clubs, recreation, newspapers, magazines, and books  | 13.      | \$             | 175.00                |
|   | tributions and religious donations   | 14.      | ·              | 200.00                |
| 5. Insurance.                           |  |          |                | 200.00                |
|   | nsurance deducted from your pay or included in lines 4 or 20.  |          |                |                       |
| 15a. Life insura                        |  | 15a.     | \$             | 140.00                |
| 15b. Health ins                         | surance  | 15b.     | \$             | 0.00                  |
| 15c. Vehicle in                         | surance  | 15c.     | \$             | 245.00                |
| 15d. Other insu                         | urance. Specify:   | 15d.     | \$             | 0.00                  |
|   | nclude taxes deducted from your pay or included in lines 4 or 20.  |          |                | ·                     |
| Specify:                                | , , ,  | 16.      | \$             | 0.00                  |
| <ol><li>Installment or I</li></ol>      | ease payments:   | <u></u>  |                |                       |
| 17a. Car paym                           | ents for Vehicle 1   | 17a.     | \$             | 0.00                  |
| 17b. Car paym                           | ents for Vehicle 2   | 17b.     | \$             | 0.00                  |
| 17c. Other. Sp                          | ecify:   | 17c.     | \$             | 0.00                  |
| 17d. Other. Sp                          |  | 17d.     | \$             | 0.00                  |
|   | of alimony, maintenance, and support that you did not report   |          | •              | 0.00                  |
|   | your pay on line 5, Schedule I, Your Income (Official Form 6I).  | . 18.    | \$             | 0.00                  |
|   | s you make to support others who do not live with you.   |          | \$             | 0.00                  |
| Specify:                                |  | 19.      |                |                       |
|   | erty expenses not included in lines 4 or 5 of this form or on S  |          |                | 0.00                  |
|   | s on other property  | 20a.     |                | 0.00                  |
| 20b. Real esta                          |  | 20b.     | •              | 0.00                  |
|   | homeowner's, or renter's insurance   | 20c.     |                | 0.00                  |
|   | nce, repair, and upkeep expenses   | 20d.     |                | 0.00                  |
|   | ner's association or condominium dues  | 20e.     | · <del></del>  | 0.00                  |
| 1. Other: Specify:                      |  | 21.      | +\$            | 0.00                  |
| 2. Your monthly e                       | expenses. Add lines 4 through 21.  | 22.      | \$             | 5,049.00              |
| -                                       | ur monthly expenses.   |          | T              | 0,0-10.00             |
| •                                       | monthly net income.  |          |                |                       |
|   | 12 (your combined monthly income) from Schedule I.   | 23a.     | \$             | 3,857.00              |
|   | r monthly expenses from line 22 above.   | 23b.     |                | 5,049.00              |
|   | , 1  |          | ·              | 0,040100              |
| 23c. Subtract v                         | your monthly expenses from your monthly income.  |          |                |                       |
|   | t is your monthly net income.  | 23c.     | \$             | -1,192.00             |
| For example, do you modification to the | an increase or decrease in your expenses within the year after<br>ou expect to finish paying for your car loan within the year or do you expect you<br>terms of your mortgage? |          |                | decrease because of a |
| ■ No.                                   |  |          |                |                       |
| ☐ Yes.                                  |  |          |                |                       |
| Explain:                                |  |          |                |                       |

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B6 Declaration (Official Form 6 - Declaration). (12/07)

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# United States Bankruptcy Court Northern District of Illinois

| In re | Mary Lynn Mapes  |  | Case No.      |                              |
|-------|--|--|---------------|------------------------------|
|       |  | Debtor(s)                                  | Chapter       | 7                            |
|       |  |  |               |                              |
|       | DECLARATION C  | CONCERNING DEBTOR                          | 'S SCHEDUL    | ES                           |
|       | DECLARATION UNDER  | PENALTY OF PERJURY BY II                   | NDIVIDUAL DEI | BTOR                         |
|       | I declare under penalty of perjury the sheets, and that they are true and correct to the sheets. |  |               | les, consisting of <u>47</u> |
| Date  | 6-29-15  | Signature Way Jumes Mary Lynn Mapes Debtor | Mapas         |                              |

Penalty for making a false statement or concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. §§ 152 and 3571.

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B7 (Official Form 7) (04/13)

# United States Bankruptcy Court Northern District of Illinois

| In re | Mary Lynn Mapes |           | Case No. |   |
|-------|-----------------|-----------|----------|---|
|       |                 | Debtor(s) | Chapter  | 7 |

### STATEMENT OF FINANCIAL AFFAIRS

This statement is to be completed by every debtor. Spouses filing a joint petition may file a single statement on which the information for both spouses is combined. If the case is filed under chapter 12 or chapter 13, a married debtor must furnish information for both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. An individual debtor engaged in business as a sole proprietor, partner, family farmer, or self-employed professional, should provide the information requested on this statement concerning all such activities as well as the individual's personal affairs. To indicate payments, transfers and the like to minor children, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. § 112; Fed. R. Bankr. P. 1007(m).

Questions 1 - 18 are to be completed by all debtors. Debtors that are or have been in business, as defined below, also must complete Questions 19 - 25. **If the answer to an applicable question is "None," mark the box labeled "None."** If additional space is needed for the answer to any question, use and attach a separate sheet properly identified with the case name, case number (if known), and the number of the question.

#### **DEFINITIONS**

"In business." A debtor is "in business" for the purpose of this form if the debtor is a corporation or partnership. An individual debtor is "in business" for the purpose of this form if the debtor is or has been, within six years immediately preceding the filing of this bankruptcy case, any of the following: an officer, director, managing executive, or owner of 5 percent or more of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor or self-employed full-time or part-time. An individual debtor also may be "in business" for the purpose of this form if the debtor engages in a trade, business, or other activity, other than as an employee, to supplement income from the debtor's primary employment.

"Insider." The term "insider" includes but is not limited to: relatives of the debtor; general partners of the debtor and their relatives; corporations of which the debtor is an officer, director, or person in control; officers, directors, and any persons in control of a corporate debtor and their relatives; affiliates of the debtor and insiders of such affiliates; and any managing agent of the debtor. 11 U.S.C. § 101(2), (31).

## 1. Income from employment or operation of business

None

State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business, including part-time activities either as an employee or in independent trade or business, from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the **two years** immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT SOURCE

\$120,105.00 2013 Business Income

### 2. Income other than from employment or operation of business

None

State the amount of income received by the debtor other than from employment, trade, profession, or operation of the debtor's business during the **two years** immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT SOURCE

\$-42,963.00 2013 Prior Year Net Operating Loss

\$-100,502.00 2013 Loss

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**AMOUNT** SOURCE

2013 Ecosteam Corporation - Repayment of Loan (Rather than taking a salary, \$7,320.00

any funds received by Debtor were offset against loans Debtor made to

Ecosteam.)

\$15,240.00 2014 Social Security on behalf of minor son

\$5,168.00 2015 Social security on behalf of minor son YTD

#### 3. Payments to creditors

None

Complete a. or b., as appropriate, and c.

Individual or joint debtor(s) with primarily consumer debts: List all payments on loans, installment purchases of goods or services, and other debts to any creditor made within 90 days immediately preceding the commencement of this case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$600. Indicate with an asterisk (\*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS DATES OF AMOUNT STILL AMOUNT PAID OF CREDITOR **PAYMENTS** OWING

None

b. Debtor whose debts are not primarily consumer debts: List each payment or other transfer to any creditor made within 90 days immediately preceding the commencement of the case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$6,225\*. If the debtor is an individual, indicate with an asterisk (\*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments and other transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

**AMOUNT** DATES OF PAID OR PAYMENTS/ AMOUNT STILL VALUE OF NAME AND ADDRESS OF CREDITOR TRANSFERS OWING **TRANSFERS** 

c. All debtors: List all payments made within one year immediately preceding the commencement of this case to or for the benefit of creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR AND RELATIONSHIP TO DEBTOR

DATE OF PAYMENT

AMOUNT PAID

AMOUNT STILL **OWING** 

#### 4. Suits and administrative proceedings, executions, garnishments and attachments

None

a. List all suits and administrative proceedings to which the debtor is or was a party within one year immediately preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

CAPTION OF SUIT NATURE OF COURT OR AGENCY STATUS OR AND CASE NUMBER AND LOCATION DISPOSITION PROCEEDING

b. Describe all property that has been attached, garnished or seized under any legal or equitable process within one year immediately

preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON FOR WHOSE

DESCRIPTION AND VALUE OF **PROPERTY** 

BENEFIT PROPERTY WAS SEIZED

DATE OF SEIZURE

<sup>\*</sup> Amount subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

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### 5. Repossessions, foreclosures and returns

None

List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR OR SELLER DATE OF REPOSSESSION, FORECLOSURE SALE, TRANSFER OR RETURN

DESCRIPTION AND VALUE OF PROPERTY

#### 6. Assignments and receiverships

None

a. Describe any assignment of property for the benefit of creditors made within **120 days** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF ASSIGNEE

DATE OF ASSIGNMENT

TERMS OF ASSIGNMENT OR SETTLEMENT

None b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within **one year** immediately

preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CUSTODIAN NAME AND LOCATION OF COURT CASE TITLE & NUMBER

DATE OF ORDER DESCRIPTION AND VALUE OF

PROPERTY

#### 7. Gifts

None

List all gifts or charitable contributions made within **one year** immediately preceding the commencement of this case except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON OR ORGANIZATION Glad Tidings DeKalb, IL 60115 RELATIONSHIP TO DEBTOR, IF ANY Church

DATE OF GIFT monthly

DESCRIPTION AND VALUE OF GIFT **\$200 per month** 

### 8. Losses

None

List all losses from fire, theft, other casualty or gambling within **one year** immediately preceding the commencement of this case **or since the commencement of this case.** (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DESCRIPTION AND VALUE OF PROPERTY 2004 Toyota Camry DESCRIPTION OF CIRCUMSTANCES AND, IF LOSS WAS COVERED IN WHOLE OR IN PART BY INSURANCE, GIVE PARTICULARS Totaled in car accident

June 2015

DATE OF LOSS

### 9. Payments related to debt counseling or bankruptcy

None

List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under the bankruptcy law or preparation of the petition in bankruptcy within **one year** immediately preceding the commencement of this case.

NAME AND ADDRESS OF PAYEE DATE OF PAYMENT, NAME OF PAYER IF OTHER THAN DEBTOR AMOUNT OF MONEY
OR DESCRIPTION AND VALUE
OF PROPERTY

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NAME AND ADDRESS OF PAYEE

Bernard J. Natale, Ltd 6833 Stalter Dr., Suite 201 Rockford, IL 61108 DATE OF PAYMENT, NAME OF PAYER IF OTHER THAN DEBTOR November 2013 AMOUNT OF MONEY
OR DESCRIPTION AND VALUE
OF PROPERTY
\$1835 including filing fees

#### 10. Other transfers

None

a. List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within **two years** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF TRANSFEREE, RELATIONSHIP TO DEBTOR

DATE

DESCRIBE PROPERTY TRANSFERRED AND VALUE RECEIVED

None b. List all property transferred by the debtor within **ten years** immediately preceding the commencement of this case to a self-settled trust or similar device of which the debtor is a beneficiary.

NAME OF TRUST OR OTHER

DEVICE

DATE(S) OF TRANSFER(S) AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY OR DEBTOR'S INTEREST

ANSFER(S) IN PROPERTY

#### 11. Closed financial accounts

None

List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within **one year** immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by or for either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF INSTITUTION

**Resource Bank** 

TYPE OF ACCOUNT, LAST FOUR DIGITS OF ACCOUNT NUMBER, AND AMOUNT OF FINAL BALANCE Checking account

Final Balance \$0 Closed in October 2014

AMOUNT AND DATE OF SALE

OR CLOSING

**Resource Bank** 

Joint checking account with daughter. Account was set up when daughter had been a minor. All funds in the account belonged to daughter. Account closed now that daughter is an adult and can have a checking account in her own name.

Final balance \$0 Closed October 2014

#### 12. Safe deposit boxes

None

List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF BANK OR OTHER DEPOSITORY NAMES AND ADDRESSES OF THOSE WITH ACCESS TO BOX OR DEPOSITORY

DESCRIPTION OF CONTENTS

DATE OF TRANSFER OR SURRENDER, IF ANY

### 13. Setoffs

None

List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within **90 days** preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

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NAME AND ADDRESS OF CREDITOR

DATE OF SETOFF

AMOUNT OF SETOFF

### 14. Property held for another person

None 

List all property owned by another person that the debtor holds or controls.

NAME AND ADDRESS OF OWNER

**Thomas Strasser** 1237 Mason Street **DeKalb, IL 60115** 

DESCRIPTION AND VALUE OF PROPERTY

Savings and checking accounts at Resource Bank (uncle's funds; Debtor is authorized user on the accounts for

conveince purposes)

Minor Son 1237 Mason Street **DeKalb, IL 60115** 

Savings account at Resource Bank (joint with son; funds are son's from soical

security)

Resource Bank

Resource Bank

LOCATION OF PROPERTY

### 15. Prior address of debtor

None

If the debtor has moved within three years immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

ADDRESS NAME USED DATES OF OCCUPANCY

#### 16. Spouses and Former Spouses

None

If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within eight years immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

NAME

### 17. Environmental Information.

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes, or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

"Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law

None

a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law:

SITE NAME AND ADDRESS

NAME AND ADDRESS OF GOVERNMENTAL UNIT

DATE OF

ENVIRONMENTAL

NOTICE LAW

None b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous

Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

SITE NAME AND ADDRESS

NAME AND ADDRESS OF GOVERNMENTAL UNIT

DATE OF

**ENVIRONMENTAL** 

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None

c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

NAME AND ADDRESS OF GOVERNMENTAL UNIT

DOCKET NUMBER

STATUS OR DISPOSITION

**BEGINNING AND** 

2003 - January 2014

(filed for bankruptcy -

**Business Chapter 7)** 

Spring 2011 - Present

**ENDING DATES** 

#### 18. Nature, location and name of business

None

a. If the debtor is an individual, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partner in a partnership, sole proprietor, or was self-employed in a trade, profession, or other activity either full- or part-time within six years immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within six years immediately preceding the commencement of this case.

If the debtor is a partnership, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within six years immediately preceding the commencement of this case.

If the debtor is a corporation, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within six years immediately preceding the commencement of this case.

LAST FOUR DIGITS OF SOCIAL-SECURITY OR OTHER INDIVIDUAL TAXPAYER-I.D. NO.

NAME (ITIN)/ COMPLETE EIN

27-4975461

EcoSteam 20-0136999 Corporation

Providence Inc

LETE EIN ADDRESS
920 W Prairie Drive, Suite M

Sycamore, IL 60178

NATURE OF BUSINESS

Commercial and residential carpet and hard surface cleaning

Consulting Business Business was held jointly by Debtor and non-filing spouse until January 2013 when it was transferred to non-filing spouse alone. Debtor was never

involved with the business; simply used the business loss as a deduction on her taxes. Only assets were office furniture valued at less

than \$500.

None b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.

NAME ADDRESS

The following questions are to be completed by every debtor that is a corporation or partnership and by any individual debtor who is or has been, within **six years** immediately preceding the commencement of this case, any of the following: an officer, director, managing executive, or owner of more than 5 percent of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership, a sole proprietor, or self-employed in a trade, profession, or other activity, either full- or part-time.

(An individual or joint debtor should complete this portion of the statement **only** if the debtor is or has been in business, as defined above, within six years immediately preceding the commencement of this case. A debtor who has not been in business within those six years should go directly to the signature page.)

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### 19. Books, records and financial statements

None

a. List all bookkeepers and accountants who within **two years** immediately preceding the filing of this bankruptcy case kept or supervised the keeping of books of account and records of the debtor.

NAME AND ADDRESS

DATES SERVICES RENDERED

None b. List all firms or individuals who within the **two years** immediately preceding the filing of this bankruptcy case have audited the books of account and records, or prepared a financial statement of the debtor.

NAME

ADDRESS

DATES SERVICES RENDERED

None

c. List all firms or individuals who at the time of the commencement of this case were in possession of the books of account and records of the debtor. If any of the books of account and records are not available, explain.

NAME

ADDRESS

None

d. List all financial institutions, creditors and other parties, including mercantile and trade agencies, to whom a financial statement was issued by the debtor within **two years** immediately preceding the commencement of this case.

NAME AND ADDRESS

DATE ISSUED

#### 20. Inventories

None

a. List the dates of the last two inventories taken of your property, the name of the person who supervised the taking of each inventory, and the dollar amount and basis of each inventory.

DATE OF INVENTORY

INVENTORY SUPERVISOR

DOLLAR AMOUNT OF INVENTORY (Specify cost, market or other basis)

None b. List the name and address of the person having possession of the records of each of the inventories reported in a., above.

DATE OF INVENTORY

NAME AND ADDRESSES OF CUSTODIAN OF INVENTORY RECORDS

### 21. Current Partners, Officers, Directors and Shareholders

None

a. If the debtor is a partnership, list the nature and percentage of partnership interest of each member of the partnership.

NAME AND ADDRESS

NATURE OF INTEREST

PERCENTAGE OF INTEREST

None b. If the debtor is a corporation, list all officers and directors of the corporation, and each stockholder who directly or indirectly owns,

controls, or holds 5 percent or more of the voting or equity securities of the corporation.

NAME AND ADDRESS

TITLE

NATURE AND PERCENTAGE OF STOCK OWNERSHIP

## 22 . Former partners, officers, directors and shareholders

None

a. If the debtor is a partnership, list each member who withdrew from the partnership within **one year** immediately preceding the commencement of this case.

**NAME** 

**ADDRESS** 

DATE OF WITHDRAWAL

None b. If the debtor is a corporation, list all officers, or directors whose relationship with the corporation terminated within **one year** immediately preceding the commencement of this case.

NAME AND ADDRESS

TITLE

DATE OF TERMINATION

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### 23. Withdrawals from a partnership or distributions by a corporation

None

If the debtor is a partnership or corporation, list all withdrawals or distributions credited or given to an insider, including compensation in any form, bonuses, loans, stock redemptions, options exercised and any other perquisite during **one year** immediately preceding the commencement of this case.

NAME & ADDRESS OF RECIPIENT, RELATIONSHIP TO DEBTOR

DATE AND PURPOSE OF WITHDRAWAL

AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY

#### 24. Tax Consolidation Group.

None

If the debtor is a corporation, list the name and federal taxpayer identification number of the parent corporation of any consolidated group for tax purposes of which the debtor has been a member at any time within **six years** immediately preceding the commencement of the case.

NAME OF PARENT CORPORATION

TAXPAYER IDENTIFICATION NUMBER (EIN)

#### 25. Pension Funds.

None

If the debtor is not an individual, list the name and federal taxpayer-identification number of any pension fund to which the debtor, as an employer, has been responsible for contributing at any time within **six years** immediately preceding the commencement of the case.

NAME OF PENSION FUND

TAXPAYER IDENTIFICATION NUMBER (EIN)

\*\*\*\*\*

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## DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

|        | under penalty of perjury that I have rea<br>they are true and correct. | the answers contained in the foregoing statement of financial affairs and any attachments there |
|--------|--|---|
| Date _ | 6-29-15  | Signature Why Mapes  Mary Lynn Mapes  Debtor  |
|        |  |   |

Penalty for making a false statement: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §§ 152 and 3571

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B8 (Form 8) (12/08)

# United States Bankruptcy Court Northern District of Illinois

|  | Northern District of Illino  | ois   |
|--|--|---|
| In re Mary Lynn Mapes  |  | Case No.  |
|  | Debtor(s)  | Chapter 7   |
| PART A - Debts secured by propert                                | INDIVIDUAL DEBTOR'S STATE  y of the estate. (Part A must be fully on additional pages if necessary.) | MENT OF INTENTION completed for EACH debt which is secured by         |
| Property No. 1   |  |   |
| Creditor's Name:<br>JP Morgan Chase                              |  | operty Securing Debt:<br>ocated at 1237 Mason Street, DeKalb IL 60115 |
| Property will be (check one):                                    |  |   |
| ☐ Surrendered  | ■ Retained   |   |
| If retaining the property, I intend to (ch ☐ Redeem the property | eck at least one):   |   |
| Reaffirm the debt  |  |   |
| ☐ Other. Explain   | (for example, avoid lien using 1   | 1 U.S.C. § 522(f)).   |
| Property is (check one):   |  |   |
| ■ Claimed as Exempt  | ☐ Not claime   | ed as exempt  |
| Attach additional pages if necessary.)                           | unexpired leases. (All three columns of Pa   | art B must be completed for each unexpired lease.                     |
| Property No. 1   |  |   |
| Lessor's Name:<br>-NONE-   | Describe Leased Property:  | Lease will be Assumed pursuant to 11 U.S.C. § 365(p)(2):              |

☐ YES

□ NO

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I declare under penalty of perjury that the above indicates my intention as to any property of my estate securing a debt and/or personal property subject to an unexpired lease.

Date 6-29-15

Signature Water Jum Marges
Mary Lynn Mapes

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# **United States Bankruptcy Court** Northern District of Illinois

| In re | e Mary Lynn Mape   | <b>e</b> s           |   |   | Case N                                  | lo.    |                              |         |
|-------|--|----------------------|---|---|---|--------|------------------------------|---------|
|       |  |                      |   | Debtor(s)   | Chapte                                  | er     | 7                            |         |
|       | DISC   | L(                   | OSURE OF COMPE  | ENSATION OF ATTO  | DRNEY FOR                               | DE     | BTOR(S)                      |         |
| 1.    | compensation paid to n   | ne v                 | within one year before the fill   | 2016(b), I certify that I am the a<br>ling of the petition in bankrupton<br>of or in connection with the b                                | cy, or agreed to be p                   | oaid t | to me, for services rendered | l or to |
|       | For legal services,  | I h                  | ave agreed to accept  |   | \$                                      |        | 1,500.00                     |         |
|       |  |                      |   | d   |   |        | 1,500.00                     |         |
|       | Balance Due  |                      |   |   | \$                                      |        | 0.00                         |         |
| 2.    | \$335.00 of the fil  | ling                 | g fee has been paid.  |   |   |        |                              |         |
| 3.    | The source of the comp   | ens                  | sation paid to me was:  |   |   |        |                              |         |
|       | ■ Debtor   |                      | Other (specify):  |   |   |        |                              |         |
| 4.    | The source of compens  | atic                 | on to be paid to me is:   |   |   |        |                              |         |
|       | ■ Debtor   |                      | Other (specify):  |   |   |        |                              |         |
| 5.    | ■ I have not agreed to   | o sh                 | nare the above-disclosed com  | npensation with any other person  | on unless they are m                    | nemb   | pers and associates of my la | w firm. |
|       |  |                      |   | nsation with a person or persons<br>ames of the people sharing in the   |   |        |                              | a. A    |
| 6.    | In return for the above-   | -dis                 | sclosed fee, I have agreed to   | render legal service for all aspe   | ects of the bankrupt                    | су са  | ase, including:              |         |
|       | <ul><li>b. Preparation and filing</li><li>c. Representation of the</li></ul> | ng d<br>he d<br>he d | of any petition, schedules, sta<br>lebtor at the meeting of credi<br>lebtor in adversary proceeding | dering advice to the debtor in d<br>atement of affairs and plan whi<br>itors and confirmation hearing,<br>ngs and other contested bankrup | ch may be required<br>and any adjourned | ;      |                              | ;       |
| 7.    | By agreement with the  | deb                  | otor(s), the above-disclosed f  | fee does not include the followi  | ng service:                             |        |                              |         |
|       |  |                      |   | CERTIFICATION   |   |        |                              |         |
|       | I certify that the foregonal bankruptcy proceeding.                          |                      | is a complete statement of a  | ny agreement or arrangement fo  | or payment to me for                    | or rej | presentation of the debtor(s | ) in    |
| Date  | ed: <b>June 30, 2015</b>   |                      |   | /s/ Meghan N. B   | Bolte                                   |        |                              |         |
|       |  |                      |   | Meghan N. Bolt  |   |        |                              |         |
|       |  |                      |   | Bernard J. Nata<br>6833 Stalter Dr.   |   |        |                              |         |
|       |  |                      |   | Rockford, IL 61   |   |        |                              |         |
|       |  |                      |   |   | Fax: (815) 316-4                        | 1646   | <b>j</b>                     |         |
|       |  |                      |   | natalelaw@hina  | stalolaw com                            |        |                              |         |

## **Chapter 7 Bankruptcy Fee Agreement**

Federal law requires the execution of a written agreement between attorney and client(s) for Bankruptcy representation. Signing this agreement shall engage the services of *Bernard J. Natale*, *Ltd.*, hereinafter "Attorney" for Bankruptcy representation pursuant to Title 11, United States Code.

Whereas MARY LYNN MAPES desire(s) to engage the services of Attorney to represent client's(s') interest in connection with Bankruptcy Proceedings, to be filed within four (4) months of this Agreement, Attorney and client(s) do hereby agree:

1. Client(s) shall pay to Attorney for the services described below in paragraph 2, the base fee of \$1,500 plus costs of \$335, prior to case filing.

- 2. The Attorney base fee shall include services rendered pre-petition as follows: Attorney shall interview client(s), analyze, prepare and file a Chapter 7 Bankruptcy Petition and appear at the first meeting of creditors held pursuant to 11 U.S.C. 341. Attorney shall further review and advise with respect to reaffirmation agreements. Whether or not a Chapter 7 bankruptcy petition is filed, all fees paid are not refundable.
- 3. After the filing of a Chapter 7 Bankruptcy Petition, as contemplated herein, any other services provided by Attorney deemed necessary and incidental to the bankruptcy proceeding shall be considered post-petition services not contemplated by the fee agreed to in paragraph 1. The base fee does not include preparation of amendments to Bankruptcy Schedules, including, but not limited to, amended schedules to add creditors not listed in the original petition. These services will be billed at Attorney's hourly rate plus cost of Court filing fees.
- The base fee does not include representation in any post-petition services which may occur, including, but not limited to, court appearances for dischargeability issues, judicial lien avoidances, relief from stay actions, or any adversary proceedings. These services will be billed at Attorney's hourly rate plus cost of Court filing fees, client(s) will be billed and, by signature below, agrees to pay, post-petition.
- 5. The failure of client(s) to pay for post-petition services when the same become due and payable, as set forth above, shall constitute cause for Attorney to withdraw as attorney of record and cease all further services to client(s). Any withdrawal as attorney for client(s) shall not be deemed a waiver of fees due and payable. Client(s) agrees to pay all reasonable costs of collection of any unpaid fees and costs, including reasonable attorney fees incurred in collection.
- 6. By executing this agreement, client(s) agree(s) that they have had an opportunity to discuss the agreement with Attorney, have asked any questions that have arisen, and received understandable explanations for the questions, and are fully aware of the information contained herein.
- 7. If the Debtor is any entity other than individuals, those individuals signing this contract on behalf of Debtor as client(s), do hereby personally guarantee payment of fees.

CLIENT Date: BERNARD J. NATALE, LTD.

Nay Jun Wapes 6/29/15

By: Measla Bolle 4/89/15

CLIENT Date:

# UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

# NOTICE TO CONSUMER DEBTOR(S) UNDER § 342(b) OF THE BANKRUPTCY CODE

In accordance with § 342(b) of the Bankruptcy Code, this notice to individuals with primarily consumer debts: (1) Describes briefly the services available from credit counseling services; (2) Describes briefly the purposes, benefits and costs of the four types of bankruptcy proceedings you may commence; and (3) Informs you about bankruptcy crimes and notifies you that the Attorney General may examine all information you supply in connection with a bankruptcy case.

You are cautioned that bankruptcy law is complicated and not easily described. Thus, you may wish to seek the advice of an attorney to learn of your rights and responsibilities should you decide to file a petition. Court employees cannot give you legal advice.

Notices from the bankruptcy court are sent to the mailing address you list on your bankruptcy petition. In order to ensure that you receive information about events concerning your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address. If you are filing a **joint case** (a single bankruptcy case for two individuals married to each other), and each spouse lists the same mailing address on the bankruptcy petition, you and your spouse will generally receive a single copy of each notice mailed from the bankruptcy court in a jointly-addressed envelope, unless you file a statement with the court requesting that each spouse receive a separate copy of all notices.

### 1. Services Available from Credit Counseling Agencies

With limited exceptions, § 109(h) of the Bankruptcy Code requires that all individual debtors who file for bankruptcy relief on or after October 17, 2005, receive a briefing that outlines the available opportunities for credit counseling and provides assistance in performing a budget analysis. The briefing must be given within 180 days before the bankruptcy filing. The briefing may be provided individually or in a group (including briefings conducted by telephone or on the Internet) and must be provided by a nonprofit budget and credit counseling agency approved by the United States trustee or bankruptcy administrator. The clerk of the bankruptcy court has a list that you may consult of the approved budget and credit counseling agencies. Each debtor in a joint case must complete the briefing.

In addition, after filing a bankruptcy case, an individual debtor generally must complete a financial management instructional course before he or she can receive a discharge. The clerk also has a list of approved financial management instructional courses. Each debtor in a joint case must complete the course.

## 2. The Four Chapters of the Bankruptcy Code Available to Individual Consumer Debtors

### Chapter 7: Liquidation (\$245 filing fee, \$75 administrative fee, \$15 trustee surcharge: Total Fee \$335)

Chapter 7 is designed for debtors in financial difficulty who do not have the ability to pay their existing debts. Debtors whose debts are primarily consumer debts are subject to a "means test" designed to determine whether the case should be permitted to proceed under chapter 7. If your income is greater than the median income for your state of residence and family size, in some cases, the United States trustee (or bankruptcy administrator), the trustee, or creditors have the right to file a motion requesting that the court dismiss your case under § 707(b) of the Code. It is up to the court to decide whether the case should be dismissed.

Under chapter 7, you may claim certain of your property as exempt under governing law. A trustee may have the right to take possession of and sell the remaining property that is not exempt and use the sale proceeds to pay your creditors.

The purpose of filing a chapter 7 case is to obtain a discharge of your existing debts. If, however, you are found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.

Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

# <u>Chapter 13</u>: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$75 administrative fee: Total Fee \$310)

Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments over

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Form B 201A, Notice to Consumer Debtor(s)

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a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.

After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

### Chapter 11: Reorganization (\$1,167 filing fee, \$550 administrative fee: Total Fee \$1,717)

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

### Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$75 administrative fee: Total Fee \$275)

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

## 3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

**WARNING:** Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court. The documents and the deadlines for filing them are listed on Form B200, which is posted at http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure.

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B 201B (Form 201B) (12/09)

# **United States Bankruptcy Court**

|         | Northern District of Illinois   |                              |                |           |                      |  |  |  |
|---------|---|------------------------------|----------------|-----------|----------------------|--|--|--|
| In re   | Mary Lynn Mapes   |                              | Case No.       |           |                      |  |  |  |
|         |   | Debtor(s)                    | Chapter        | 7         |                      |  |  |  |
|         | CERTIFICATION OF NOTICE TO CONSUMER DEBTOR(S) UNDER § 342(b) OF THE BANKRUPTCY CODE |                              |                |           |                      |  |  |  |
|         | I (We), the debtor(s), affirm that I (we) hav                                       | Certification of Debtor      | e, as required | by § 342( | b) of the Bankruptcy |  |  |  |
| Code.   |   |                              |                |           | -                    |  |  |  |
| Mary L  | ynn Mapes   | X May June Signature of Debt | y Wage         | 2         | 6-29-15              |  |  |  |
| Printed | Name(s) of Debtor(s)  | Signature of Debt            | or /           |           | Date                 |  |  |  |
| Case N  | lo. (if known)  | X Signature of Joint         | Debtor (if any | ·)        | Date                 |  |  |  |

Instructions: Attach a copy of Form B 201 A, Notice to Consumer Debtor(s) Under § 342(b) of the Bankruptcy Code.

Use this form to certify that the debtor has received the notice required by 11 U.S.C. § 342(b) only if the certification has NOT been made on the Voluntary Petition, Official Form B1. Exhibit B on page 2 of Form B1 contains a certification by the debtor's attorney that the attorney has given the notice to the debtor. The Declarations made by debtors and bankruptcy petition preparers on page 3 of Form B1 also include this certification.

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# United States Bankruptcy Court Northern District of Illinois

|       |  | Northern District of Illinois                        |                            |                |
|-------|--|--|----------------------------|----------------|
| In re | Mary Lynn Mapes                            | Debtor(s)  | Case No. Chapter 7         |                |
|       | VE   | CRIFICATION OF CREDITOR M.                           | ATRIX                      |                |
|       |  | Number of  | Creditors:                 | 58             |
|       | The above-named Debtor(s) (our) knowledge. | hereby verifies that the list of credito             | ors is true and correct to | the best of my |
| Date: | 6-29-15                                    | May Jym Wa<br>Mary Lynn Mapes<br>Signature of Debtor | i<br>apes                  | ······         |

Arthur Strass ase 15-81721 Doc 1 Deceased

1890CUMENT DrRage 71 of 72 PO Box 20550 Rochester, NY 14602-0550

Sycamore, IL 60178

Asset Acceptance LLC PO Box 1630 Warren, MI 48090-1630

DeKalb Clinic Chartered 1850 Gateway Drive Sycamore, IL 60178-3192 Gary Tadd 1135 Elizabeth Drive DeKalb, IL 60115

AT&T Bankruptcy Department 6021 S. Rio Grande Avenue Orlando, FL 32859

Deluxe for Business PO Box 742572 Cincinnati, OH 45274-2573 GECRB/Lowe's Attn: Bankruptcy Department PO Box 103104 Roswell, GA 30076

Badger Tag 83 Bentem Street Random Lake, WI 53075

Dex One PO Box 660835 Dallas, TX 75266-0835

H&R Accounts, Inc. 7017 John Deere Parkway PO Box 672 Moline, IL 61266-0672

Berlands Tools 600 Oak Creek Drive Lombard, IL 60148

Ecosteam 920 W. Prairie Drive Suite M Sycamore, IL 60178

Hintzsche Oil PO Box 367 Maple Park, IL 60151-0367

Best Buy Credit Services PO Box 790441 Saint Louis, MO 63179

Exxon Mobil Credit Card Center PO Box 6404 Sioux Falls, SD 57117-6404 Idearc Media, LLC PO Box 619810 DFW Airport, TX 75261-9810

Bill Me Later PO Box 2394 Omaha, NE 68103-2394

Family Dental Care 1840 DeKalb Avenue Sycamore, IL 60178-3190 **IDES** Collections Section 33 S. State Street, 10th Floor Chicago, IL 60603-2802

Capital One Bankruptcy Claims Servicer PO Box 30285 Salt Lake City, UT 84130-0285

Fifth Third Bank Card Center PO Box 740789 Cincinnati, OH 45274-0789

Illinois Department of Revenue Bankruptcy Section PO Box 64338 Chicago, IL 60664-0338

CBNA/Sears PO Box 6282 Sioux Falls, SD 57117-6282

Fifth Third Bank 5050 Kingsley Drive MD# 1MOC2N Cincinnati, OH 45263 Internal Revenue Service Centralized Insolvency PO Box 7346 Philadelphia, PA 19101-7346

ComEd 3 Lincoln Center Attn: Bkcy Group-Claims Department Oakbrook Terrace, IL 60181

Franks, Gerkin & McKenna, PC 19333 E Grant Highway PO Box 5 Marengo, IL 60152

Jerry's Country Cabinet Shop 5266 West Pines Road Oregon, IL 61061

John Chattelicase 15-81721 Doc 1 ნქოს 06/30/15 Entered 06/30/15 14: აგეკერი ტონის სახია ს c/o Aspen Chiropractic 650 N Peace Road DeKalb, IL 60115

2000 HUMENT BOUR ASPE 72 of 72 Naperville, IL 60563

PO Box 619009 Dallas, TX 75261-9009

John Mapes 1237 Mason Street DeKalb, IL 60115

Personnel Concepts 3200 E. Guasti Road Ontario, CA 91761

Target National Bank Target Card Services PO Box 673 Minneapolis, MN 55440-0673

JP Morgan Chase Chase Bank, USA, NA 131 S. Dearborn St. - Floor 5 Chicago, IL 60603

Petkovsek & Moran LLP 4001 Nakoosa Trail Suite 200 Madison, WI 53714-1355

United States Trustees Office 780 Regent Street Suite 304 Madison, WI 53715

Klein Stoddard Buck Waller & Lewis 2045 Aberdeen Court Suite A Sycamore, IL 60178

Pitney Bowes 2225 American Drive Neenah, WI 54956-1005 Universal Fleet PO Box 70997 Charlotte, NC 28272-0997

Kohls P.O. Box 3115 Milwaukee, WI 53201 Pitney Bowes Purchase Power PO Box 371874 Pittsburgh, PA 15250-7874

Verizon Select Services, Inc. PO Box 650457 Dallas, TX 75265-0457

McBee Systems, Inc. PO Box 88042 Chicago, IL 60680-1042 Rockford Bank & Trust Company PO Box 1748 Rockford, IL 61110

Wisconsin Department of Revenue PO Box 8901 Madison, WI 53708-8901

McCarthy, Burgess & Wolff The MB&W Building 26000 Cannon Road Cleveland, OH 44146

Sam's Club Attn: Bankruptcy Dept P.O. Box 103104 Roswell, GA 30076

Wm. F. Meyer Co. 1855 E. New York Street Aurora, IL 60502

Mercedes Benz of Hoffman Estates 1000 W. Golf Road Hoffman Estates, IL 60169

Sears PO Box 182149 Columbus, OH 43218-2149 Yellowbook P.O. Box 3162 Cedar Rapids, IA 52406

NexTraq 1200 Lake Hearn Drive Suite 500 Atlanta, GA 30319

Shell Commercial PO Box 183019 Columbus, OH 43218-3019

NiCor Gas - Bankruptcy Dept. 1844 Ferry Road Naperville, IL 60563

Sprint P.O. Box 8077 London, KY 40742